

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 694109

Entity Name: MICONEX CORPORATION

FILED  
Jan 17, 2009  
Secretary of State

**Current Principal Place of Business:**

3085 W. 80TH ST  
HIALEAH, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

3085 W. 80TH ST  
HIALEAH, FL 33018

**New Mailing Address:**

FEI Number: 59-2118736      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MORELL, ABILIO M.  
8270 NW 166 TERRACE  
HIALEAH, FL 33016      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PDST ( ) Delete  
Name: MORELL, ABILIO M  
Address: 8720 NW 166TH TERRACE  
City-St-Zip: MIAMI, FL 33016

Title: VP ( ) Delete  
Name: MORELL, ALEJANDRO  
Address: 14792 NW 87TH COURT  
City-St-Zip: MIAMI LAKES, FL 33018

Title: VP ( ) Delete  
Name: RAMOS, BARBARO  
Address: 4200 SW 154TH COURT  
City-St-Zip: MIAMI, FL 33185

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ABILIO M MORELL

P

01/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date