2007 Limited Partnership Annual Report Due By May 1, 2007

FILED Apr 27, 2007 08:00 Al Secretary of State

DOCUMENT	#	A0400000023	6
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1. Entity Name MIAMIMEX, LTD.



Principal Place of Business

JUAN A. FIGUEROA 1428 BRICKELL AVENUE, SUITE 206 MIAMI, FL 33131 Maing Address
JUAN A. FIGUEROA
1428 BRICKELL AVENUE, SUITE 206
MIAMI, FL 33131



DO NOT WRITE IN THIS SPACE

O1042007 No Chg-LP

 4. FEI Number
 Applied For 20-0768350

 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CR2E003 (12/06)

6. Name and Address of Current Registered Agent

FIGUEROA, JUAN A 1428 BRICKELL AVENUE, SUITE 206 MIAMI, FL 33131

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, the obligations of registered agent.	in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	DATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

GENERAL PARTNER INFORMATION 12. P03000132625 DOCUMENT # MIAMIMEX, INC. 1428 BRICKELL AVENUE, SUITE 206 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CiTY-ST-ZIP DOCUMENT / STREET ADDRESS CITY-ST-ZIP DOCUMENT # CHECK NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP

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U00000739046 05/14/07-80009-013 500.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: 1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

A2507

305-448-884

Daytime Phone