2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11104

City-St-Zip:

Entity Name: VICTOR R. MIRANDA & ASSOCIATES, INC.

FILED May 11, 2009 Secretary of State

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Current Principal Place of Business:					New Principal Place of Business:		
	PRESS CREE	EK ROAD)				
5TH FLOO FT. LAUDE	PR ERDALE, FL	33309	US				
Current Mailing Address:					New Mailing Address:		
P.O. BOX S FT. LAUDE	9705 ERDALE, FL	33310	US		P.O. BOX (POMPANC	66927), FL 33066	S US
FEI Number:	59-2045774	FEI Nu	ımber Applied For()	FEI Numl	ber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
100 W CYF FIFTH FLC FT LAUDE The above	RDALE, FL	33309 U		purpose of	changing i	ts registere	d office or registered agent, or both,
SIGNATUR	RE:						
	Electro	onic Signa	ature of Registered Ag	ent			Date
			.S., the corporation did no und Contribution ().	ot receive th	e prior notic	e.	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	MIRANDA, VIC	ESS CREE	K RD. 5TH FLR 3309	1	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address:	() Delete		1	Title: Name: Address:	S MIRANDA, S 100 W. CYF	()Change(X)Addition SALLY W PRESS CREEK RD., 5TH FLOOR

City-St-Zip: FT. LAUDERDALE, FL 33309

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: VICTOR R. MIRANDA P 05/11/2009