

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007 08:00 A
Secretary of State

DOCUMENT # F25926 1. Entity Name MARINSA MIAMI CORPORATION	
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Principal Place of Business 14250 S.W. 136TH ST. UNIT NO. 4 MIAMI, FL 33186	Mailing Address 14250 S.W. 136TH ST. UNIT NO. 4 MIAMI, FL 33186
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03272007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2078984	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ULRICH, WALCHLI
 MARINSA MIAMI CORP..
 14250 S.W. 136TH ST. UNIT 4
 MIAMI, FL 33186

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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, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WALCHLI, UELI 10730 SW 148TH AVE DR MIAMI, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST WALCHLI, ROSE M 10730 SW 148TH AVE DR MIAMI, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/12/07-80002-018 158.75

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12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rosa Maria Walchli ROSA MARIA WALCHLI 03/31/07 (305)2520118
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #