

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F80886

Entity Name: MIAMI FRAME SHOP, INC.

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

1864 NW 23RD STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1864 NW 23RD STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 59-2237531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARONE, JR., NATHANIEL L
8270 SUNSET DR
MIAMI, FL 33143 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: P () Delete
Name: DEARMAS, JR, JULIO
Address: 1711 SW 85TH COURT
City-St-Zip: MIAMI, FL 33155

Title: VP () Delete
Name: DEARMAS, PEDRO
Address: 1860 SW 64TH AVE
City-St-Zip: MIAMI, FL 33155

Title: T () Delete
Name: ALVAREZ, ROSA
Address: 9718 SW 146 CT.
City-St-Zip: MIAMI, FL 33186

Title: AV () Delete
Name: ALVAREZ, ARGELIO
Address: 9718 SW 146 CT.
City-St-Zip: MIAMI, 33186

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DE ARMAS,, JULIO SR
Address: 10050 SW 146 PL
City-St-Zip: MIAMI, FL 33186

Title: VP (X) Change () Addition
Name: DE ARMAS, JULIO JR
Address: 1711 SW 85 CT
City-St-Zip: MIAMI, FL 33155

Title: T (X) Change () Addition
Name: ALVAREZ, ROSA M
Address: 9718 SW 146 CT.
City-St-Zip: MIAMI, FL 33186

Title: AV (X) Change () Addition
Name: ALVAREZ, ARGELIO L
Address: 9718 SW 146 CT.
City-St-Zip: MIAMI, FL 33186

Title: S () Change (X) Addition
Name: DE ARMAS, PEDRO
Address: 1860 SW 64TH AVE
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSA M ALVAREZ

T

04/27/2006

Electronic Signature of Signing Officer or Director

Date