2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # G48209 1. Entity Name ELDORADO MIRANDA MANUFACTURING CO., INC.

FILED Mar 31, 2008 08:00 AN Secretary of State

Principal	Di	n

1744 12TH STREET S.E. LARGO, FL 33771 US

Mailing Address

1744 12TH STREET S.E. LARGO, FL 33771 US



CR2E034 (11/05)

Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MIRANDA, JR., ANDREW PRES 2400 WEYMOUTH DRIVE CLEARWATER, FL 33764

DO NOT WRITE IN THIS SPACE

No Chg-P

03142008

8. The above the obligat	named entity submits this statement for the pulions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept U00000876607 04/11/08-80080-017 150.00		
SIGNATURE_	SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent aignature required when reinstating) OATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finan- Trust Fund Contribution.	cing []	\$5.00 May Be Added to Fees	and the second s		
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MIRANDA.JR, ANDREW P 2400 WEYMOUTH DRIVE CLEARWATER, FL 33764						
TIILE NAME STREET ADDRESS CHY-ST-ZIP	VSTD MIRANDA, CORA L V/S/T 2400 WEYMOUTH DRIVE CLEARWATER, FL 33764				a		
NAME STREET ADDRESS CITY-ST-ZIP	D MIRANDA, CORA L S/T 2400 WEYMOUTH DRIVE CLEARWATER, FL 33764		DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY+ST-ZIP			IN THIS SPACE				
TITLE NAME STREET ADDRESS CHY-ST-ZIP							
TITLE NAME STREET ADDRESS							

12. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR RINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/2008 127-586-070

SECTROPSURER