

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H65344

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: MIAMI INTERNATIONAL AIRPORT HOTEL, INC.

**Current Principal Place of Business:**

4251 NW 11TH ST.  
MIAMI, FL 331262630

**New Principal Place of Business:**

**Current Mailing Address:**

4251 NW 11TH ST.  
MIAMI, FL 331262630

**New Mailing Address:**

FEI Number: 59-2615660

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VALDES, ALFREDO  
4251 SW 11TH ST.  
MIAMI, FL 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: ALFREDO, VALDES  
Address: 9521 S.W. 102 STREET  
City-St-Zip: MIAMI, FL

Title: V ( ) Delete  
Name: VALDES, ALBERTO  
Address: 11273 SW 29TH ST  
City-St-Zip: MIAMI, FL 33165

Title: T ( ) Delete  
Name: VALDES, ROSA  
Address: 11273 SW 29TH ST  
City-St-Zip: MIAMI, FL 33165

Title: S ( ) Delete  
Name: VALDES, MAYRA  
Address: 9521 SW 102 ST  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALFREDO VALDES

P

04/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date