

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J31829

Entity Name: MUA, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

5455 S.W. 8TH STREET
SUITE 220
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14-0729
CORAL GABLES, FL 33114

New Mailing Address:

FEI Number: 42-1664151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELIS, VIDAL MARINO
5455 S.W. 8TH STREET
SUITE 220
MIAMI, FL 33134 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VELIS, VIDAL MARINO
Address: 5455 S.W. 8TH STREET, SUITE 220
City-St-Zip: MIAMI, FL 33134

Title: SD () Delete
Name: VELIS, JOSEFA M
Address: 5455 S.W. 8TH STREET, SUITE 220
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: VIDAL MARINO VELIS

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date