2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K14156

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

MIAMI, FL 33155

ZUNIGA, TOM

() Delete

201 GALEN DR, UNIT # 106

KEY BISCAYNE, FL 33149

FILED Mar 03, 2006 Secretary of State

DOCON		4156						Secretary of S	iale
Entity Na	me: MIAMI [DEEMART	CORP.						
Current Principal Place of Business:					ı	New Principal Place of Business:			
6311 SW 3 MIAMI, FL									
Current Mailing Address:					ı	New Mailing Address:			
6311 SW 3 MIAMI, FL									
FEI Number	: 65-0031674	FEI Nu	mber Applied	For ()	FEI Numb	per Not Appl	icable ()	Certificate of Status Desired	d()
Name and Address of Current Registered Agent:						Name and Address of New Registered Agent:			
	, JUAN M. 121ST STRE GARDEN, FI		US						
	named entit e of Florida.	y submits t	this stateme	nt for the pu	urpose of	changing i	ts register	ed office or registered agent, o	or both,
SIGNATUI	RE:								
	Electr	onic Signa	ture of Regi	stered Ager	nt			Date	
Election Ca	mpaign Financ	ing Trust Fu	ınd Contributi	ion ().					
OFFICERS AND DIRECTORS:					ı	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	P MARTELL, JU 9285 NW 12 HIALEAH, FL	IST STREET			1	Fitle: Name: Address: City-St-Zip:	CH MARTELL, 9285 NW ¹ HIALEAH,	121ST STREET	
Title: Name: Address: City-St-Zip: Title:	MARTELL, E 9285 NW 12 HIALEAH GA S	1ST STREET RDEN, FL 3 () Delete) (Fitle: Name: Address: City-St-Zip: Fitle:	HIALEAH (121ST STREET SARDEN, FL 33018 (X) Change () Addition	
Name: Address:	MARTELL, C 6311 SW 34					Name: Nddress:	MARTELL,	CARLOS M 34 ST	

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

MIAMI, FL 33155

() Change () Addition

SIGNATURE: CARLOS MARTELL P 03/03/2006