

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 05, 2006 8:00 am**  
**Secretary of State**

05-05-2006 90161 047 \*\*\*158.75

**DOCUMENT # L25515**

1. Entity Name

MIKASA HOMES, INC.



Principal Place of Business

13200 S.W. 128 ST.  
BLDG. G  
MIAMI FL 33186  
US

Mailing Address

13200 S.W. 128 ST.  
BLDG. G  
MIAMI FL 33186  
US



2. Principal Place of Business

13200 S.W. 128 ST.

Suite, Apt. #, etc.  
BLOK G-3

City & State  
MIAMI FL

Zip  
33186

Country  
DADE

3. Mailing Address

13200 SW 128 ST

Suite, Apt. #, etc.  
BLOK G-3

City & State  
MIAMI FL

Zip  
33186

Country  
DADE

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0151748

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GUTIERREZ, JOSE A  
11787 S.W. 93RD TERRACE  
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

P  
GUTIERREZ, TANIA  
11787 SW 93RD TERRACE  
MIAMI FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VPS  
GUTIERREZ, JOSE A.  
11787 SW 93RD TERRACE  
MIAMI FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 TITLE OF SIGNING OFFICER OR DIRECTOR

JOSE A. GUTIERREZ 4-18-2006 305 255 7575

Date

Daytime Phone #