2008 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 15, 2008 08:00 AN Secretary of State DOCUMENT # M36516 1. Entity Name MINÁ & SONS CORP. Principal Place of Business Mailing Address 2732 NW 21 TERRACE. 4001 SW 7 ST. MIAMI, FL 33134 MIAMI, FL 33134 01052008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2703443 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE MINA, KHALIL 4001 SW 7 ST. MIAMI, FL 33134 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. DAIF (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME MINA, KHALIL STREET ADDRESS 4001 S.W. 7 ST. CITY - ST- 7IP MIAMI, FL TITLE MINA, WALID NAME STREET ADDRESS 4001 S.W. 7 ST. CITY-ST-7IP MIAMI, FL TIFLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. Thereby 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 series of trusted 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 accurate the empowered. changed, or on an attachmen

SIGNATURE:

CITY-ST-ZIP

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED