


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008 08:00 A
Secretary of State

DOCUMENT # M77559 1. Entity Name MIRA PROPERTIES INC.	
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Principal Place of Business % DELCO REALTY, INC 8798 SW 8 ST., STE. 1 MIAMI, FL 33174-3201	Mailing Address % DELCO REALTY, INC 8798 SW 8 ST., STE. 1 MIAMI, FL 33174-3201
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DO NOT WRITE IN THIS SPACE



03132008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2004887	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEL COLLADO, ANTOLIN
1300 SW 97TH AVE
MIAMI, FL 33174

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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	PD FUENMAYOR, ASDRUBAL QUINTA TANITA AVENIDA C CARACAS VENEZUELA.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DEL COLLADO, ANTOLIN 1300 SW 97TH AVE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FUENMAYOR, ASDRUBAL A QUINTA TANITA AVENIDA C CARACAS VENEZUELA.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FERNANDEZ, DORITA C. 1300 S.W. 97TH AVENUE MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000855349
03/27/08-80040-024 158.75

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12. I hereby certify that the information supplied with this filing 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 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: *D. Orey* MAR 14 2008 305-553-8904

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #