

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003876

FILED  
May 07, 2007  
Secretary of State

Entity Name: MISSION MIAMI, INC.

**Current Principal Place of Business:**

12815 SW 134 CT.  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

12815 SW 134 CT.  
MIAMI, FL 33186

**New Mailing Address:**

FEI Number: 03-0506593      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

VEGA, DAVID  
12815 SW 134 CT.  
MIAMI, FL 33186      US

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

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: BASKIN, BILLY BISHOP  
Address: 16800 NW 22 AVE  
City-St-Zip: MIAMI, FL 33056

Title: DV      ( ) Delete  
Name: WHITE, WILLIAM DR.  
Address: 13601 SW 102 AVE  
City-St-Zip: MIAMI, FL 33176

Title: DS      ( ) Delete  
Name: WOODBURY, NICHOLAS  
Address: 10005 SW 23 TERR  
City-St-Zip: MIAMI, FL 33189

Title: DT      ( ) Delete  
Name: VALVERDE, AUGUSTO REV.  
Address: 2323 SW 27 AVE  
City-St-Zip: MIAMI, FL 33145

Title: D      ( ) Delete  
Name: MALISKAS, ED  
Address: 10251 SW 64 ST.  
City-St-Zip: MIAMI, FL 33173

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID VEGA

REV

05/07/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date