2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005728

Entity Name: MIAMI NEIGHBORHOODS UNITED, INC.

FILED Feb 18, 2009 Secretary of State

1665 SW 23 STREET 631 N.E. 57TH STREET MIAMI, FL 33145 631 N.E. 57TH STREET MIAMI, FL 33137

Current Mailing Address: New Mailing Address:

1665 SW 23 STREET 631 N.E. 57TH STREET MIAMI, FL 33145 MIAMI, FL 33137

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

 MANN, PAUL
 CRUZ, ELVIS

 1665 SW 23 STREET
 631 N.E. 57TH STREET

 MIAMI, FL 33129 US
 MIAMI, FL 33137 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: ELVIS CRUZ 02/18/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: SOLARES, GRACE Name:

 Name:
 SOLARES, GRACE
 Name:

 Address:
 60 SW 30 ROAD
 Address:

 City-St-Zip:
 MIAMI, FL 33129
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 HAYNES, HERSCHEL
 Name:

 Address:
 4601 N.W. 15TH AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33137
 City-St-Zip:

Title: SEC () Delete Title: SEC (X) Change () Addition Name: MANN, PAUL Name: CRUZ, ELVIS

Address: 1665 SW 23 STREET Address: 631 N.W. 57TH STREET
City-St-Zip: MIAMI, FL 33145 City-St-Zip: MIAMI, FL 33137

Title: TRS () Delete Title: () Change () Addition

 Name:
 STEPHAN, WENDY
 Name:

 Address:
 101 NE 43 ST.
 Address:

 City-St-Zip:
 MIAMI, FL 33137
 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: GRACE SOLARES P 02/18/2009