

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 20, 2009
Secretary of State**

DOCUMENT# N96000000120

Entity Name: MIAMI AIKIKAI, INC.

Current Principal Place of Business:

4603 SW 75TH AVE
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

9400 S. DADELAND BOULEVARD
SUITE 600
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0640526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELIOT W. RIFKIN, P.A.
9400 S. DADELAND BLVD.
SUITE 600
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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: D () Delete
Name: DODGE, PETER
Address: 9400 S. DADELAND BLVD, #600
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: RIFKIN, ELIOT
Address: 9400 S. DADELAND BLVD., SUITE 600
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: JOSHUA, AYAL
Address: 9400 SOUTH DADELAND BLVD., SUITE 600
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: DELGADO, JESUS
Address: 9400 SOUTH DADELAND BLVD., SUITE 600
City-St-Zip: MIAMI, FL 33156

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: ELIOT W. RIFKIN

PRES

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date