

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000011152

Entity Name: MIAMI 58 CORPORATION

FILED  
Feb 17, 2010  
Secretary of State

**Current Principal Place of Business:**

C/O G. FRANK QUESADA, ESQ.  
1313 PONCE DE LEON BLVD., SUITE 200  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

C/O G. FRANK QUESADA, ESQ.  
1313 PONCE DE LEON BLVD., SUITE 200  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 65-1076492      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

QUESADA, G. FRANK ESQ.  
1313 PONCE DE LEON BLVD., SUITE 200  
CORAL GABLES, FL 33134      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JUELLE, TERESA  
Address: 1313 PONCE DE LEON BLVD STE 200  
City-St-Zip: CORAL GABLES, FL

Title: SD  
Name: JUELLE, SUSAN  
Address: 1313 PONCE DE LEON BLVD STE 200  
City-St-Zip: CORAL GABLES, FL

Title: TD  
Name: JUELLE, JOSE A  
Address: 1313 PONCE DE LEON BLVD STE 200  
City-St-Zip: CORAL GABLES, FL

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSE A. JUELLE

T

02/17/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date