


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 19, 2007 08:00 A
Secretary of State

DOCUMENT # P01000089800 1. Entity Name MI BEBE, INC.	
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Principal Place of Business 9805 EMERALD LINKS DRIVE TAMPA, FL 33626	Mailing Address 9805 EMERALD LINKS DRIVE TAMPA, FL 33626
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01092007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3735909	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent BALDOR, CARLOS 9805 EMERALD LINKS DR. TAMPA, FL 33626
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**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

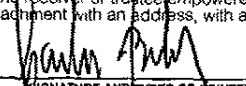
9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BALDOR, LIANA 9805 EMERALD LINKS DRIVE TAMPA, FL 33626
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BALDOR, CARLOS 9805 EMERALD LINKS DR. TAMPA, FL 33626
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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01/22/07-80054-014 150.00

**DO NOT WRITE
IN THIS SPACE**

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:  CARLOS BALDOR 1/9/07 813-886-3300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #