

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000122002

**FILED**  
**Apr 06, 2007**  
**Secretary of State**

**Entity Name:** MIAMI SHORES APPLIANCE REPAIR, INC

**Current Principal Place of Business:**

901 NW 143 STREET  
MIAMI, FL 33168

**New Principal Place of Business:**

**Current Mailing Address:**

901 NW 143 STREET  
MIAMI, FL 33168

**New Mailing Address:**

**FEI Number:** 60-0001186

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVERA, CARMEN A  
901 NW 143RD STREET  
MIAMI, FL 33168 US

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

HILDEBRANDT, MARK H.P.A.  
300 SEVENTY FIRST STREET  
SUITE 302  
MIAMI BEACH, FL 33141 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: MARK H. HILDEBRANDT

04/06/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RIVERA, CARMEN A  
Address: 901 NW 143RD STREET  
City-St-Zip: MIAMI, FL 33168

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

Title: P/D (X) Change ( ) Addition  
Name: KOTALIK, KENNY A  
Address: 901 NW 143RD STREET  
City-St-Zip: MIAMI, FL 33168

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNY A. KOTALIK

P/D

04/06/2007

Electronic Signature of Signing Officer or Director

Date