

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000087689

Entity Name: M. P. S. OF MIAMI, INC.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

7975 W 28 AVE
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

7975 W 28 AVE
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 22-3865236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASSANET, MAYKEL
5350 N.W. 182 STREET
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

MASSANET, MAYKEL
7561 W 29 WAY
HIALEAH, FL 33018 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: JOAQUIN MASSANET

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MASSANET, JOAQUIN
Address: 7561 WEST 29 WAY
City-St-Zip: HIALEAH, FL 33018

Title: VD () Delete
Name: MASSANET, MAGDIEL
Address: 5765 WEST 20 AVENUE #409
City-St-Zip: HIALEAH, FL 33012

Title: SD () Delete
Name: MASSANET, MAIKEL
Address: 5350 N.W. 182 STREET
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: MASSANET, MAGDIEL
Address: 6191 W 24 AVE
City-St-Zip: HIALEAH, FL 33016

Title: SD (X) Change () Addition
Name: MASSANET, MAIKEL
Address: 7561 W 29 WAY
City-St-Zip: HIALEAH, FL 33018

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

SIGNATURE: JOAQUIN MASSANET

PRES

01/15/2009

Electronic Signature of Signing Officer or Director

Date