

2009

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

09 MAY 29 PM 4:39

SECRETARY OF STATE
TAMM-THASSEE FLORIDA200156573392
05/29/09--01003--D11 **150.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000096131
1. Entity Name Miami Legal Investigations, Inc.

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2. Principal Place of Business 1 N.E. 2nd Ave. Suite, Apt. #, etc. Suite 200 City & State Miami, FL Zip 33132-2500	3. Mailing Address 1 N.E. 2nd Ave. Suite, Apt. #, etc. Suite 200 City & State Miami, FL Zip 33132-2500
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4. FEI Number 52-2375791	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name Reveros, Yadira
Street Address (P.O. Box Number is Not Acceptable) 16103 S.W. 43rd St.
City Miami
FL Zip Code 33185

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 reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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	D/P/S/T Reveros, Yadira 16103 S.W. 43rd St. Miami, FL 33185	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Yadira Reveros Yadira Reveros 4/24/09 305-374-9220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #