

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000099035

Entity Name: LEGACY OF MIAMI, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

12245 SW 89 AVE
MIAMI, FL 33176

New Principal Place of Business:

8035 NW 67TH STREET
MIAMI, FL 33166

Current Mailing Address:

12245 SW 89 AVE
MIAMI, FL 33176

New Mailing Address:

8035 NW 67TH STREET
MIAMI, FL 33166

FEI Number: 54-2078313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MISHAAN, MARCOS Y
12245 SW 89 AVE
MIAMI, FL 33176 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: P () Delete
Name: MISHAAN, MARCOS Y
Address: 12245 SW 89 AVE
City-St-Zip: MIAMI, FL 33176

Title: V () Delete
Name: FEDERICO, CAROL
Address: 12245 SW 89 AVE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MARCOS Y MISHAAN

P

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date