2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 27, 2006 8:00 am Secretary of State

03-10-2006 90015 031 ***158.75 **DOCUMENT # P02000116248** MIAMI OUTBOARD SERVICE, CORP. Principal Place of Business Maiting Address 66007316 7860 NW 53 ST 7860 NW 53 ST. MIAMI, FL 33166 MIAMI, FL 33166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Act. #, etc. 03042006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 16-1635928 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CANO, RICHARD 4146 W. 6 COURT Street Address (P.O. Box Number is Not Acceptable) HIALEAH, FL 33012 City Zio Code 8. The above ramed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flonds. I am lamiliar with, and accept the obligations of registered agent. INOTE: Requiered Agent signature 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TiTLE PTD ☐ Deleta TITLE ☐ Change Addition CANO, RICHARD NAME NAME 4146 W. 6 COURT STREET ADDRESS STREET ADDRESS CITY-S1-ZP HIALEAH, FL 33012 CITY-ST-ZIP MLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIFLE TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE - Oelete mile Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CHY-SI-7P ITTLE Delete IIILE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete UNE Change ☐ Addition NAME NUM STREET ADORESS STREET ADDRESS CITY-ST-ZIP CHY-SI-ZP 12. Thereby certify that the information supplied with this filling 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 exemption. SIGNATURE: Date Daytime Prione #



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2006

MIAMI OUTBOARD SERVICE, CORP. 7860 NW 53 ST. MIAMI, FL 33166

Subject: MIAMI OUTBOARD SERVICE, CORP.

Reference Number:

P02000116248

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj ANNUAL REPORTS SECTION