## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jul 17, 2006 08:00 AM **DOCUMENT # P02000118197 Secretary of State** 1. Entity Name M & L ENTERPRISES OF MIAMI, CORP. Mailing Address Principal Place of Business 18625 SW 105 PLACE 18625 SW 105 PLACE MIAMI, FL 33157 MIAMI, FL 33157 No Chg-P CR2E034 (11/05) 07122006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 46-0505614 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARTINEZ, ENRIQUE PSTD DO NOT WRITE 18625 SW 105 PL. PERRINE, FL 33157 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS 10. PSTD TITLE MARTINEZ, ENRIQUE NAME STREET ADDRESS 18625 SW 105 PL. CITY-ST-7IP PERRINE, FL 33157 TITLE NAME STREET ADDRESS U00000570837 CITY-ST-ZIP 07/18/06-80012-010 158.75 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing 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 address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_