

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90019 021 ***150.00

DOCUMENT # P03000007808 1. Entity Name MIR REMODELATIONS AND FLOORS, INC.																																																					
Principal Place of Business 8231 NW 8 ST. N 201 MIAMI, FL 33126			Mailing Address 8231 NW 8 ST. N 201 MIAMI, FL 33126																																																		
2. Principal Place of Business 2619 W. 70th Place Suite, Apt. #, etc.		3. Mailing Address 2619 W. 70th Place Suite, Apt. #, etc.																																																			
City & State Healeah		City & State Healeah		4. FEI Number 56-2317088																																																	
Zip 33016		Country Daile		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																	
6. Name and Address of Current Registered Agent MIR, ALEXANDER 8231 SW 8 ST. APT. 201 MIAMI, FL 33126				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2619 W. 70th Place City Healeah FL 33016																																																	
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 Alexander Mir DATE 3/6/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																		
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;">Delete <input type="checkbox"/></td> </tr> <tr> <td></td> <td>MIR, ALEXANDER</td> <td></td> </tr> <tr> <td></td> <td>8231 NW 8 ST., N201</td> <td></td> </tr> <tr> <td></td> <td>MIAMI, FL 33126</td> <td></td> </tr> </table>			TITLE	NAME	Delete <input type="checkbox"/>		MIR, ALEXANDER			8231 NW 8 ST., N201			MIAMI, FL 33126		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: right;">Change <input type="checkbox"/> Addition <input type="checkbox"/></td> </tr> <tr> <td></td> <td>2619 W. 70th Place</td> <td></td> </tr> <tr> <td></td> <td>Healeah, FL 33016</td> <td></td> </tr> </table>			TITLE	NAME	Change <input type="checkbox"/> Addition <input type="checkbox"/>		2619 W. 70th Place			Healeah, FL 33016																												
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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: Alexander Mir 3/6/06 (305) 267-4971 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																					