

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041527

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: MIAMI BUSINESS SOLUTIONS, INC.

## Current Principal Place of Business:

548 WINDSOR ESTATES DR.  
DAVENPORT, FL 33837

## New Principal Place of Business:

## Current Mailing Address:

2073 SW 57TH CT  
MIAMI, FL 33155

## New Mailing Address:

548 WINDSOR ESTATES DR  
DAVENPORT, FL 33837 US

FEI Number: 06-1690782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MIRALLES, EDUARDO PD  
2073 SW 57TH COURT  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

MIRALLES, EDUARDO PD  
548 WINDSOR ESTATES DR  
DAVENPORT, FL 33837 US

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:

04/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: MIRALLES, EDUARDO  
Address: 2073 SW 57TH COURT  
City-St-Zip: MIAMI, FL 33155

Title: VPTD ( ) Delete  
Name: CAPULLA, MONICA B  
Address: 2073 SW 57TH CT  
City-St-Zip: MIAMI, FL 33155

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: MIRALLES, EDUARDO  
Address: 548 WINDSOR ESTATES DR  
City-St-Zip: DAVENPORT, FL 33837 US

Title: VPTD (X) Change ( ) Addition  
Name: CAPULLA, MONICA B  
Address: 548 WINDSOR ESTATES DR  
City-St-Zip: DAVENPORT, FL 33837 US

I hereby certify that the information supplied with this filing does not qualify 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: EDUARDO MIRALLES

PSD

04/18/2009

Electronic Signature of Signing Officer or Director

Date