

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059431

FILED  
Jan 28, 2007  
Secretary of State

Entity Name: MIAMI WOOD DESIGN, CORP.

**Current Principal Place of Business:**

13103 SW 122 AVE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

15324 SW 53 STREET  
MIAMI, FL 33185

**New Mailing Address:**

FEI Number: 36-4532583

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OLIVA, RICARDO  
15324 SW 53RD STREET  
MIAMI, FL 33185 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: PD ( ) Delete  
Name: OLIVA, RICARDO  
Address: 15324 SW 53RD STREET  
City-St-Zip: MIAMI, FL 33185

Title: VD ( ) Delete  
Name: OLIVA, RICARDO  
Address: 15324 SW 53 RD STREET  
City-St-Zip: MIAMI, FL 33185

Title: SEC ( ) Delete  
Name: OLIVA, RICARDO  
Address: 15324 SW 53 RD STREET  
City-St-Zip: MIAMI, FL 33185

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: OLIVA, ILIANA  
Address: 15324 SW 53 RD STREET  
City-St-Zip: MIAMI, FL 33185

Title: SEC (X) Change ( ) Addition  
Name: OLIVA, ILIANA  
Address: 15324 SW 53 RD STREET  
City-St-Zip: MIAMI, FL 33185

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: RICARDO OLIVA

PD

01/28/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date