## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## May 02, 2006 08:00 AN Secretary of State DOCUMENT # P03000089794 M.I.M. TECH, INC. Principal Place of Business Mailing Address 4488 E 10TH CT 4488 E 10TH CT HIALEAH, FL 33013 HIALEAH, FL 33013 - 5 กรวี (พื่อเพิ่ม เกมพายอดเรียงแบบที่ตั้งในของตัวสัง และคระบาที่สิ่นที่สิดครั้งและสิ่น ความราย และสิ่นที่สิ่น และที่สิ่น และที่สิ้น และที่สิ่น 04282006 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 73-1676304 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SUAREZ, MARTIN DO NOT WRITE 4488 E 10TH CT HIALEAH, FL 33013 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, 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 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 TITLE SUAREZ, MARTIN NAME STREET ADDRESS 4488 E 10TH CT ----U000005588D1 HIALEAH, FL 33013 CITY-ST-7IP 05/17/06-80112-003 150,00 TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE The Table 1 with the control of the NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-71P 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 it made under oath; that I am an officer or director of the corporation or the receiver or dustee 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.

NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #