2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 21, 2006
Secretary of State

DOCUMENT# P03000100235

Entity Name: MI ISLA INTERNATIONAL SERVICE CORP

Current Principal Place of Business:

POST OFFICE BOX 11291
HIALEAH, FL 330111291

New Principal Place of Business:

638 EAST 9 ST
HIALEAH, FL 330111291

Current Mailing Address:

POST OFFICE BOX 11291
HIALEAH, FL 330111291

New Mailing Address:

FEI Number: 55-0846371 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOMEZ, EMIGDIO F
228 W 18 STREET
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

GOMEZ, EMIGDIO F
591 SE 1 ST
HIALEAH, FL 33010 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: EMIGDIO F GOMEZ 12/21/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SOSA, DEYANIRA
Address: P.O. BOX 111291
City-St-Zip: HIALEAH, FL 33011

Title: V (X) Delete
Name: PUJOL, IVAN
Address: 228 W 18 STREET
City-St-Zip: HIALEAH, FL 33010

Title: S (X) Delete
Name: GOMEZ, EMIGDIO F
Address: 228 W 18 STREET
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GOMEZ, EMIGDIO F
Address: 591 SE 1 ST
City-St-Zip: HIALEAH, FL 33010

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

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

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: EMIGDIO F GOMEZ PD 12/21/2006
Electronic Signature of Signing Officer or Director Date