
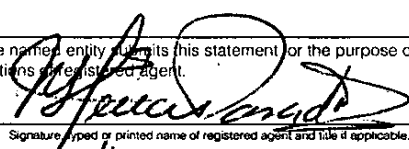
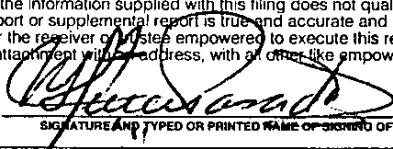


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90164 006 ***150.00

DOCUMENT # P03000133983 1. Entity Name MI HABANA AUTO SALES, INC			
Principal Place of Business 4010 EAST 8TH STREET HIALEAH, FL 33013		Mailing Address 6800 SW 40 ST 186 MIAMI, FL 33165	
2. Principal Place of Business 4010 East 8th Street Suite, Apt. #, etc.		3. Mailing Address 4010 East 8th Street Suite, Apt. #, etc.	
City & State Hialeah, FL 33013 Zip Country 33013 USA		City & State Hialeah, FL 33013 Zip Country 33013 USA	
4. FEI Number 55-0852450		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent STELLA PARADE, MARIA 6800 SW 40TH STREET #186 MIAMI, FL 33165		7. Name and Address of New Registered Agent Name STELLA PARADA, MARIA Street Address (P.O. Box Number is Not Acceptable) 4010 East 8th Street City Hialeah FL Zip Code 33013	
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 the registered agent. SIGNATURE  Stella Parada April 10, 2005 <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, 2005 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PARADA, MARIA S MSS 3436 SW 88 PL MIAMI, FL 33165 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	950 East 29th Street Hialeah, fl 33013 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOMEZ, CLEMENTE R SR 3436 SW 88 PL MIAMI, FL 33165 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	950 East 29th Street Hialeah, FL 33013 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 an officer like empowered.			
SIGNATURE: 		Date April 10, 2005 Daytime Phone # 305-693-0041	