

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000053292

Entity Name: MLA DESIGNS, INC.

**FILED**  
**Mar 24, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

921 UNIVERSITY DR  
CORAL GABLES, FL 33134

## **New Principal Place of Business:**

## **Current Mailing Address:**

921 UNIVERSITY DR  
CORAL GABLES, FL 33134

## **New Mailing Address:**

FEI Number: 57-1202031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## **Name and Address of New Registered Agent:**

ALEMAN, EDUARDO H  
921 UNIVERSITY DR  
CORAL GABLES, FL 33134 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: EDUARDO H ALEMAN

03/24/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: ALEMAN, MARY-LOLY  
Address: 921 UNIVERSITY DR  
City-St-Zip: CORAL GABLES, FL 33134

Title: V  
Name: ALEMAN, EDUARDO J  
Address: 921 UNIVERSITY DR  
City-St-Zip: CORAL GABLES, FL 33134

Title: STD  
Name: ALEMAN, EDUARDO H  
Address: 921 UNIVERSITY DR  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: EDUARDO H ALEMAN

STD

03/24/2011

Electronic Signature of Signing Officer or Director

Date