

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000071875

Entity Name: MIAMI IT GROUP, INC.



**Current Principal Place of Business:**

1172 SOUTH DIXIE HWY  
PMB 451  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

1172 SOUTH DIXIE HWY  
PMB 451  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 81-0650113      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SOLER, JOSE A  
1172 SOUTH DIXIE HIGHWAY  
PMB 451  
CORAL GABLES, FL 33146 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: SOLER, JOSE A  
Address: 1350 SW 57TH AVENUE SUITE 208  
City-St-Zip: MIAMI, FL 33144

Title: VT ( ) Delete  
Name: LARRAURI, JORGE  
Address: 77 CRANDON BLVD. APT. 8D  
City-St-Zip: KEY BISCAYNE, FL 33149

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

Title: PS (X) Change ( ) Addition  
Name: SOLER, JOSE A  
Address: 1172 SOUTH DIXIE HIGHWAY; PMB451  
City-St-Zip: CORAL GABLES, FL 33146

Title: VT (X) Change ( ) Addition  
Name: LARRAURI, JORGE  
Address: 1172 SOUTH DIXIE HIGHWAY; PMB451  
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSE SOLER

PRES

05/10/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date