

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000026169

Entity Name: MAMI CHULA STYLE, INC.

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

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

1015 NE 36TH AVE  
HOMESTEAD, FL 33033

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

2121 NE 37 RD  
HOMESTEAD, FL 33033

## **Current Mailing Address:**

1015 NE 36TH AVE  
HOMESTEAD, FL 33033

## **New Mailing Address:**

2121 NE 37 RD  
HOMESTEAD, FL 33033

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

CUEVAS, OMAR  
1015 NE 36TH AVE.  
HOMESTEAD, FL 33033 US

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

CUEVAS, OMAR  
2121 NE 37 RD  
HOMESTEAD, FL 33033 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: OMAR CUEVAS

04/30/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PTD  
Name: CUEVAS, OMAR  
Address: 2121 NE37 RD  
City-St-Zip: HOMESTEAD, FL 33033

Title: VP  
Name: CUEVAS, JASHUOMAR  
Address: 3360 NE 14TH DR UNIT 101  
City-St-Zip: HOMESTEAD, FL 33033

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: OMAR CUEVAS

PTD

04/30/2011

Electronic Signature of Signing Officer or Director

Date