



2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000042004 1. Entity Name MYAREAH, INC.	
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Principal Place of Business 3728 NW 213 STREET MIAMI GARDENS, FL 33055	Mailing Address 3728 NW 213 STREET MIAMI GARDENS, FL 33055
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DO NOT WRITE IN THIS SPACE

FILED
07 JUL -3 PM 3: 51
STATE OF FLORIDA
TALLAHASSEE, FLORIDA



06272007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2523394	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

**MARSHALL, MARY B
3728 NW 213 ST
MIAMI GARDENS, FL 33055**

DO NOT WRITE
IN THIS SPACE

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 registered agent.

SIGNATURE: Mary Marshall 6-29-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renouncing) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	MARSHALL, MARY B
STREET ADDRESS	3728 NW 213 STREET
CITY - ST - ZIP	MIAMI GARDENS, FL 33055
TITLE	VP
NAME	MARSHALL, LARRY
STREET ADDRESS	3728 NW 213 STREET
CITY - ST - ZIP	MIAMI GARDENS, FL 33055
TITLE	
NAME	<i>8/1/5</i>
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DO NOT WRITE
IN THIS SPACE

000105619590
07/06/07--01020--004 **100.00

000105619590
07/06/07--01020--005 **50.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

SIGNATURE: Mary Marshall MARY Marshall 6-29-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #