

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051096

Entity Name: MARIDALYA UNISEX INC.

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

5354 W 12 AVE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

5354 W 12 AVE
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 84-1675764

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALONSO, IDALIA
6931 MIAMI LAKE WAY S
MIAMI, FL 33014 US

Name and Address of New Registered Agent:

PAEZ, IDALIA
6931 MIAMI LAKE WAY S
MIAMI, FL 33014 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: IDALIA PAEZ

02/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALONSO, IDALIA
Address: 5354 WEST 12TH AVE.
City-St-Zip: HIALEAH, FL 33012

Title: VP () Delete
Name: MAESTRE, MARIELA
Address: 5354 WEST 12TH AVE.
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PAEZ, IDALIA
Address: 5354 WEST 12TH AVE.
City-St-Zip: HIALEAH, FL 33012

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: IDALIA PAEZ

P

02/06/2009

Electronic Signature of Signing Officer or Director

Date