

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90033 035 ***150.00

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1. Entity Name

MIDUSHI PUBLISHING, INC.



Principal Place of Business

9130 S DADELAND BLVD #1800
MIAMI FL 33156

Mailing Address

9130 S DADELAND BLVD #1800
MIAMI FL 33156



2. Principal Place of Business - No P.O. Box #

10773 NW 58 STREET

3. Mailing Address

10773 NW 58 STREET

1st MOORE

CR2E034 (10/07)

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

20-2743995

Applied For

Not Applicable

Zip

33178

Country

USA

Zip

33178

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERCUSON, DAVID
9130 S DADELAND BLVD #1800
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

[Signature]

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	BERCUSON, DAVID	
STREET ADDRESS	9130 S DADELAND BLVD #1800	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D/P	☐ Change ☒ Addition
NAME	EMAN, MARK	
STREET ADDRESS	10773 NW 58 STREET, #608	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplied with this 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 attached list of names and addresses, and of whom I am empowered.

SIGNATURE:

[Signature]

2-25-08

305/670-0018

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #