

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90233 019 \*\*\*150.00

**DOCUMENT # P05000135407**

1. Entity Name  
**MIRAGE FURNITURE, INC.**



Principal Place of Business  
~~801 WEST 36 STREET~~  
**HIALEAH, FL 33012**

Mailing Address  
**801 WEST 36 STREET**  
**HIALEAH, FL 33012**

2. Principal Place of Business  
**3000 S. State Rd. 7**  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
**Miramar, Florida**

City & State

4. FEI Number  
**56-2535859**

Applied For  
Not Applicable

Zip Country  
**33023 USA**

Zip Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

~~FRYE, AUSTIN A.~~  
~~20900 WEST DIXIE HIGHWAY~~  
~~AVENTURA, FL 33180~~

**7. Name and Address of New Registered Agent**

Name  
**Yaneisy Blanco**

Street Address (P.O. Box Number is Not Acceptable)  
**801 West 36 Street**

City Hialeah **FL** Zip Code **33012**

8. The above named party 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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/14/06

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE **D, P** ☐ Delete  
NAME **BLANCO, RAMONA**  
STREET ADDRESS **801 WEST 36 STREET**  
CITY-ST-ZIP **HIALEAH, FL 33012**

TITLE **D, VP** ☐ Delete  
NAME **BLANCO, YANEISY**  
STREET ADDRESS **801 WEST 35 STREET**  
CITY-ST-ZIP **HIALEAH, FL 33012**

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 ☐ 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

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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 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:**

**Yaneisy Blanco, V.P.**

1/14/06

Date

(954) 961-2011

Daytime Phone #