

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000009473

Entity Name: M.S.M. MIAMI, INC.

FILED  
May 29, 2009  
Secretary of State

## Current Principal Place of Business:

2525 NW 56TH TERRACE  
APT. A  
MIAMI, FL 33142

## New Principal Place of Business:

## Current Mailing Address:

2525 NW 56TH TERRACE  
APT. A  
MIAMI, FL 33142

## New Mailing Address:

FEI Number: 65-1270221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOORE, MAURICE SR.  
2525 NW 56TH TERRACE  
APT. A  
MIAMI, FL 33142 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MOORE, MAURICE E SR.  
Address: 2525 NW 56TH TERRACE, APT. A  
City-St-Zip: MIAMI, FL 33142

Title: SD ( ) Delete  
Name: MOORE, SANDRA  
Address: 2525 NW 56TH TERRACE, APT. A  
City-St-Zip: MIAMI, FL 33142

Title: OD ( ) Delete  
Name: MOORE, MARIO  
Address: 2525 NW 56TH TERRACE, APT. A  
City-St-Zip: MIAMI, FL 33142

Title: OD ( ) Delete  
Name: MOORE, HENSEL  
Address: 2525 NW 56TH TERRACE, APT. A  
City-St-Zip: MIAMI, FL 33142

Title: OD ( ) Delete  
Name: LESLIE, MOORE  
Address: 1424 AVON LANE, APT. 11P  
City-St-Zip: NORTH LAUDERDALE, FL 33068

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MAURICE E MOORE

P

05/29/2009

Electronic Signature of Signing Officer or Director

Date