

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90054 020 ***150.00

DOCUMENT # P06000027647

1. Entity Name
MEILING INVESTMENTS, CORP.



Principal Place of Business
**3785 NW 82 AVE #112
DORAL, FL 33166**

Mailing Address
**3785 NW 82 AVE #112
DORAL, FL 33166**

40098301



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

12950 SW 3ST

3. Mailing Address

12950 SW 3ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04242007

Chg-P

CR2E034 (12/06)

City & State

MIAMI - FL

City & State

MIAMI - FL

4. FEI Number

20-4381121

Applied For

Not Applicable

Zip

33184

Country

Zip

33184

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PADRON, CARLOS A
12950 SW 3ST
MIAMI, FL 33184**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DP
PADRON, CARLOS A
12950 SW 3STVE #112
MIAMI, FL 33184** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DV
PEREZ, YUDITH A
12950 SW 3STVE #112
MIAMI, FL 33184** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PADRON Carlos A
12950 SW 3ST
MIAMI - FL 33184** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PEREZ YUDITH
12950 SW 3ST
MIAMI - FL 33184** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/24/07