2008 FOR PROFIT CORPÓRATION ANNUAL REPORT

Secretary of State DOCUMENT # P06000133859 03-06-2008 90044 008 ***150.00 1. Entity Name MIYA, INC Principal Place of Business Mailing Address 4825 S.W. 148TH AVENUE 1040 N.W. 108TH AVENUE **DAVIE, FL 33331** PLLANTATION, FL 33322 02162008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 87-0784955 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHEW, HELENA DO NOT WRITE 1040 N.W. 108TH AVENUE PLANTATION, FL 33322 IN THIS SPACE 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME CHEW, WAIL STREET ADDRESS 1040 N.W. 108TH AVENUE CITY-ST-ZIP PLANTATION, FL 33322 TITLE NAME CHEW, HELENA STREET ADDRESS 1040 N.W. 108TH AVENUE CITY-ST-ZIP PLATATION, FL 33322 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

127/08 950

FILED Mar 06, 2008 8:00 am

954-680-8717