

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000039805

FILED
May 04, 2008
Secretary of State

Entity Name: MIA CASA DESIGN GROUP, INC.

Current Principal Place of Business:

1590 NE 173RD ST.
N. MIAMI BCH, FL 33162

New Principal Place of Business:

17096 COLLINS AVE
405
SUNNY ISLES, FL 33160

Current Mailing Address:

1590 NE 173RD ST.
N. MIAMI BCH, FL 33162

New Mailing Address:

17096 COLLINS AVE
405
SUNNY ISLES, FL 33160

FEI Number: 20-8774224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REINA, SERGIO
1590 NE 173RD ST.
N. MIAMI BCH, FL 33162 US

Name and Address of New Registered Agent:

REINA, SERGIO
17096 COLLINS AVE UNIT 405
SUNNY ISLES, FL FL 33160 US

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: SERGIO REINA

05/04/2008

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: D () Delete
Name: REINA, SERGIO
Address: 1590 NE 173RD ST.
City-St-Zip: N. MIAMI BCH, FL 33162

Title: D () Delete
Name: GADEA, PATRICIA
Address: 1590 NE 173RD ST.
City-St-Zip: N. MIAMI BCH, FL 33162

Title: S (X) Delete
Name: CUSICANQUI, JULIO
Address: 465 E 28 ST #12A
City-St-Zip: HIALEAH, FL 33013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: REINA, SERGIO
Address: 17096 COLLINS AVE UNIT 405
City-St-Zip: SUNNY ISLES, FL 33160

Title: D (X) Change () Addition
Name: GADEA, PATRICIA
Address: 17096 COLLINS AVE
City-St-Zip: SUNNY ISLES, FL 33160

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: PATRICIA GADEA

D

05/04/2008

Electronic Signature of Signing Officer or Director

Date