

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000061714

FILED  
May 01, 2008  
Secretary of State

Entity Name: MIAMI GARDENS OBSERVER INC

**Current Principal Place of Business:**

5735 PEMBROKE ROAD  
HOLLYWOOD, FL 33023 US

**New Principal Place of Business:**

**Current Mailing Address:**

5735 PEMBROKE ROAD  
HOLLYWOOD, FL 33023 US

**New Mailing Address:**

FEI Number: 26-0225929      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MINTO, LEONA  
5735 PEMBROKE ROAD  
HOLLYWOOD, FL 33023 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: CEO ( ) Delete  
Name: MINTO, LEONA  
Address: 5735 PEMBROKE ROAD  
City-St-Zip: HOLLYWOOD, FL 33023 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: SVP ( ) Change (X) Addition  
Name: STROUSE, LEONEL  
Address: 15299 NE 12TH AVE  
City-St-Zip: NMB, FL 33162

Title: VP ( ) Change (X) Addition  
Name: MINTO-COLEY, ANDRE  
Address: 15299 NE 12TH AVE  
City-St-Zip: NMB, FL 33162

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: LEONA MINTO

CEO

05/01/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date