

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000100798

Entity Name: MOREJON DELIVERY, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

54 W 26TH STREET  
APT #4  
HIALEAH, FL 33010

**New Principal Place of Business:**

3140 NW 99 STREET  
MIAMI, FL 33147

**Current Mailing Address:**

54 W 26TH STREET  
APT #4  
HIALEAH, FL 33010

**New Mailing Address:**

3140 NW 99 STREET  
MIAMI, FL 33147

FEI Number: 26-1082776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAGARINO, MARIA C  
592 SW 10 STREET APT 2  
MIAMI, FL 33130 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

**OFFICERS AND DIRECTORS:**

Title: PT  
Name: ROJAS, MIGUEL MOREJON  
Address: 3140 NW 99 STREET  
City-St-Zip: MIAMI, FL 33147

Title: VP  
Name: ROJAS, MIGUEL MOREJON  
Address: 3140 NW 99 STREET  
City-St-Zip: MIAMI, FL 33147

I hereby 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 all other like empowered.

SIGNATURE: ROJAS MIGUEL MOREJON

PT

04/29/2011

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

\_\_\_\_\_  
Date