

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000115648

FILED
Jun 03, 2009
Secretary of State

Entity Name: MIRABAL DISTRIBUTORS, INC.

Current Principal Place of Business:

8801 FOUNTAINBLEAU BLVD
UNIT 213
MIAMI, FL 33172

New Principal Place of Business:

1149 W 40 PL
HIALEAH MIAMI, FL 33012

Current Mailing Address:

8801 FOUNTAINBLEAU BLVD
UNIT 213
MIAMI, FL 33172

New Mailing Address:

1149 W 40 PL
HIALEAH MIAMI, FL 33012

FEI Number: 26-1283628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIRABAL, ALBERTO
8801 FOUNTAINBLEAU BLVD
UNIT 213
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

MIRABAL, ALBERTO
1149 W 40 PL
HIALEAH MIAMI, FL 33012 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: ALBERTO MIRABAL

06/03/2009

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: P () Delete
Name: MIRABAL, ALBERTO
Address: 1149 W. 40 PLACE
City-St-Zip: HIALEAH, FL 33012

Title: VP () Delete
Name: MIRABAL, ALBERTO
Address: 1149 W. 40 PLACE
City-St-Zip: MIAMI, FL 33012

Title: TREAS () Delete
Name: MIRABAL, ALBERTO
Address: 1149 W. 40 PLACE
City-St-Zip: MIAMI, FL 33012

Title: SECR () Delete
Name: MIRABAL, ALBERTO
Address: 1149 W. 40 PLACE
City-St-Zip: MIAMI, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ALBERTO MIRABAL

P

06/03/2009

Electronic Signature of Signing Officer or Director

Date