

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000122381

Entity Name: MYSTIKA, INC

FILED  
May 11, 2009  
Secretary of State

## Current Principal Place of Business:

982 NW 133 CT  
MIAMI, FL 33182 US

## New Principal Place of Business:

## Current Mailing Address:

982 NW 133 CT  
MIAMI, FL 33182 US

## New Mailing Address:

FEI Number: 26-1962099

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTINEZ, ANA L MS  
8030 SW 19 TREET  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

SALAZAR-MOJICA, IRIS MS  
3984 ADRA AVENUE  
DORAL, FL 33178 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: IRIS SALAZAR-MOJICA

05/11/2009

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: ANDINO, MARGARITA  
Address: 982 NW 133 CT  
City-St-Zip: MIAMI, FL 33182 US

Title: VP ( ) Delete  
Name: MARTINEZ, ANA L  
Address: 8030 SW 19 STREET  
City-St-Zip: MIAMI, FL 33155 US

Title: TREA (X) Delete  
Name: SALAZAR-MOJICA, IRIS  
Address: 3984 ADRA AVENUE  
City-St-Zip: DORAL, FL 33178 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: SALAZAR-MOJICA, IRIS  
Address: 3984 ADRA AVENUE  
City-St-Zip: DORAL, FL 33178 US

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: IRIS SALAZAR-MOJICA

VP

05/11/2009

Electronic Signature of Signing Officer or Director

Date