

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000049983

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** THE SPOON MUG INC

**Current Principal Place of Business:**

1600 NW 165TH STREET  
N MIAMI BEACH, FL 33169

**New Principal Place of Business:**

1600 NW 165TH STREET  
NORTH MIAMI BEACH, FL 33169

**Current Mailing Address:**

1600 NW 165TH STREET  
N MIAMI BEACH, FL 33169

**New Mailing Address:**

1600 NW 165TH STREET  
NORTH MIAMI BEACH, FL 33169

**FEI Number:** 26-2637657

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIAMI SOUVENIRS INC.  
1600 NW 165TH STREET  
N MIAMI BEACH, FL 33169 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: P  
Name: MIAMI SOUVENIRS  
Address: 1600 NW 165TH STREET  
City-St-Zip: N MIAMI BEACH, FL 33169

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: ABRAHAM FRANCO

P

02/16/2011

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

\_\_\_\_\_  
Date