

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000080746

Entity Name: VIDA SOLUTION, CORP.

**FILED**  
**May 01, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

4995 NW 79TH AVE STE 109  
DORAL, FL 33166

## **New Principal Place of Business:**

10801 NW 50 ST APT 208  
DORAL, FL 33178

## **Current Mailing Address:**

4995 NW 79TH AVE STE 109  
DORAL, FL 33166

## **New Mailing Address:**

10801 NW 50 ST APT 208  
DORAL, FL 33178

FEI Number: 26-4370201

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MIRO, MILAGROS  
4995 NW 79TH AVE STE 109  
DORAL, FL 33166 US

## **Name and Address of New Registered Agent:**

MIRO, MILAGROS  
10801 NW 50 ST APT 208  
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: MILAGROS MIRO

05/01/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: DP  
Name: MIRO, MILAGROS  
Address: 10801 NW 50 ST APT 208  
City-St-Zip: DORAL, FL 33178

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: MILAGROS MIRO

DP

05/01/2011

Electronic Signature of Signing Officer or Director

Date