

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000083335

Entity Name: MCE MIAMI INC

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9787 NW 29 STREET  
DORAL, FL 33172

**New Principal Place of Business:**

9787 NW 29 STREET  
DORAL, FL 33172 US

**Current Mailing Address:**

9787 NW 29 STREET  
DORAL, FL 33172

**New Mailing Address:**

9787 NW 29 STREET  
DORAL, FL 33172 US

FEI Number: 45-3358408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORANDINI NICARETTA, ALEXANDRE  
9787 NW 29 STREET  
DORAL, FL 33172 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: PSTD  
Name: MORANDINI NICARETTA, ALEXANDRE  
Address: 9787 NW 29 STREET  
City-St-Zip: DORAL, FL 33172 US

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: ALEXANDRE MORANDINI NICARETTA

PSTD

03/05/2012

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

\_\_\_\_\_  
Date