

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P93000014281

1. Entity Name
MIAMI BIRDLAND, CORP.



Principal Place of Business
7111 W. FLAGLER ST.
MIAMI, FL 33144

Mailing Address

7111 W. FLAGLER ST.
MIAMI, FL 33144

2. Principal Place of Business - No P.O. Box #

24600 SW 214 Place

3. Mailing Address

24600 SW 214 Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072008 Chg-P CR2E034 (12/06)

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0390319

Applied For
Not Applicable

Zip

33031

Zip

33031

Country

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIEDRA, LOURDES
7111 W. FLAGLER ST.
MIAMI, FL 33144

7. Name and Address of New Registered Agent

Name

PIEDRA, LOURDES

Street Address (P.O. Box Number is Not Acceptable)

24600 SW 214 Place
City Miami, FL Zip Code 33031

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Lourdes Piedra

(NOTE: Registered Agent signature required when reinstating)

DATE

3-19-08

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD
NAME PIEDRA, LOURDES
STREET ADDRESS 11250 SW 60TH TERR
CITY-ST-ZIP MIAMI, FL 33173

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

*Pos Soc DIR
PIEDRA, LOURDES
24600 SW 214 PLACE
MIAMI, FL 33031*

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

Change

Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lourdes Piedra

305
Pos 3-19-08 774-9855
Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR