

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000039301

FILED
Jan 13, 2009
Secretary of State

Entity Name: SECURE WRAP OF MIAMI, INC.

Current Principal Place of Business:

4050 NW 29 ST
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

4050 NW 29 ST
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-0503112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILLALON, RADAMES P DT
4050 NW 29 ST
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

VILLALON, RADAMES PDT
4050 NW 29 ST
MIAMI, FL 33142 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: RADAMES VILLALON

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VILLALON, RADAMES
Address: 7501 MILLER DRIVE
City-St-Zip: MIAMI, FL 33155

Title: VP () Delete
Name: RAMOS, ENRIQUE A
Address: 8433 WOODMERE ST
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VILLALON, RADAMES
Address: 7501 MILLER DRIVE
City-St-Zip: MIAMI, FL 33155

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: RADAMES VILLALON

P

01/13/2009

Electronic Signature of Signing Officer or Director

Date