2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P95000032050

1. Entity Name
MITA, INC.

Principal Place of Business	Mailing Address
26180 ISLE WAY	26180 ISLE WAY
BONITA SPRINGS, FL 34134 US	BONITA SPRINGS, FL 34134 US

DO NOT WRITE IN THIS SPACE

01212007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0574419	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TAFT, GISELA
26180 ISLE WAY
BONITA SPRINGS, FL 34134

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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: _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

10.	OFFICERS AND DIRECTORS	
TITLE	P	
NAME	TAFT, GISELA	
STREET ADDRESS	26180 ISLE WAY	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		

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U00000720076
05/01/07-80090-017 150.00

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: _____   4/17/07   239 498 9976

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #