

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000023505

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: MIAMI SUN INTERNATIONAL CORP.

## Current Principal Place of Business:

4045 SHERIDAN AVE #322  
MIAMI BEACH, FL 33140

## New Principal Place of Business:

## Current Mailing Address:

4045 SHERIDAN AVE #322  
MIAMI BEACH, FL 33140

## New Mailing Address:

FEI Number: 65-0750071

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLIONER, MARTA  
4045 SHERIDAN AVE #322  
MIAMI BEACH, FL 33140 US

## Name and Address of New Registered Agent:

KLIONER, GLEB  
4045 SHERIDAN AVE #322  
MIAMI BEACH, FL 33140 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: GLEB KLIONER

02/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: KLIONER, MARTA  
Address: 4045 SHERIDAN AVE #322  
City-St-Zip: MIAMI BEACH, FL 33140

Title: V ( ) Delete  
Name: KLIONER, MARTA  
Address: 4045 SHERIDAN AVE #322  
City-St-Zip: MIAMI BEACH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: KLIONER, GLEB  
Address: 4045 SHERIDAN AVE #322  
City-St-Zip: MIAMI BEACH, FL 33140

Title: V (X) Change ( ) Addition  
Name: KLIONER, GLEB  
Address: 4045 SHERIDAN AVE #322  
City-St-Zip: MIAMI BEACH, FL 33140

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: GLEB KLIONER

DPST

02/26/2009

Electronic Signature of Signing Officer or Director

Date