

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000109191

**Entity Name:** MIAMI CANINE SERVICES, INC

**Current Principal Place of Business:**

8835 SW 107 AVENUE SUITE 105  
MIAMI, FL 33176

**Current Mailing Address:**

8835 SW 107 AVENUE SUITE 105  
MIAMI, FL 33176 US

**FEI Number:** 32-0363615

**Certificate of Status Desired:** No

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

MORAGA, MANUEL  
8835 SW 107 AVENUE  
MIAMI, FL 33176 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            D  
Name            MORAGA, MANUEL  
Address        8835 SW 107 AVENUE # 105  
City-State-Zip: MIAMI FL 33176

*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:** MANUEL MORAGA

**PRESIDENT**

**04/30/2014**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date