

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000058341

FILED
Jan 20, 2004
Secretary of State

Entity Name: MURAR MANAGEMENT, INC.

Current Principal Place of Business:

9999 COLLINS AVE UNIT #18B
BAL HARBOR, FL 33154

New Principal Place of Business:

Current Mailing Address:

9999 COLLINS AVE UNIT #18B
BAL HARBOR, FL 33154

New Mailing Address:

FEI Number: 35-2206395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUMMINGS, PAUL M
1428 BRICKELL AVE STE 400
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROSEN, MURIEL S
Address: 9999 COLLINS AVE UNIT #18B
City-St-Zip: BAL HARBOR, FL 33154

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: ROSEN, MURIEL S
Address: 9999 COLLINS AVE UNIT #18B
City-St-Zip: BAL HARBOR, FL 33154

Title: P () Change (X) Addition
Name: NANCY, SCHAFFEL R
Address: 9983 N. W. 64TH COURT
City-St-Zip: PARKLAND, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NANCY SCHAFFEL

P

01/20/2004

Electronic Signature of Signing Officer or Director

Date