

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742100

FILED  
Jul 23, 2009  
Secretary of State

**Entity Name:** MOVIMIENTO DE RECUPERACION REVOLUCIONARIA (M.R.R.) INC.

**Current Principal Place of Business:**

124 NW 15TH AVE  
MIAMI, FL 33125

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 651452  
MIAMI, FL 33265

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ARIAS, FERNANDO  
124 NW 15TH AVE  
MIAMI, FL 33125    US

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

RIERA, ARTURO J  
124 NW 15TH AVE  
MIAMI, FL 33125    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: ARTURO J. RIERA

07/23/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP                      ( ) Delete  
Name: FERNANDO, ARIAS  
Address: 14612 SW 45 TERRACE  
City-St-Zip: MIAMI, FL 33175

Title: P                      ( ) Delete  
Name: BRINGAS, GENEROSO  
Address: 7240 SW 18 RD  
City-St-Zip: MIAMI, FL 33155

Title: VPD                      ( ) Delete  
Name: MARTINEZ, ROLANDO  
Address: 1821 JEFFERSON AVENUE APT 106  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D                      (X) Change ( ) Addition  
Name: RIERA, ARTURO J  
Address: 4600 SW 12 STREET  
City-St-Zip: MIAMI, FL 33134

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTURO J. RIERA

D

07/23/2009

Electronic Signature of Signing Officer or Director

Date