

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 01, 2005 8:00 am
Secretary of State

04-01-2005 90008 025 ***150.00

DOCUMENT # M99738

1. Entity Name

THE MSR GROUP, INC.



Principal Place of Business

201 ALHAMBRA CIRCLE
SUITE 804
CORAL GABLES FL 33134
US

Mailing Address

201 ALHAMBRA CIRCLE
SUITE 804
CORAL GABLES FL 33134
US

2. Principal Place of Business

2332 Galiano Street

3. Mailing Address

2332 Galiano Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

Coral Gables, FL

City & State

Coral Gables, FL

4. FEI Number

65-0076764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Zip

Country

33134

US

Zip

Country

33134

US

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERMAN, GARY L
201 ALHAMBRA CIRCLE
SUITE 804
CORAL GABLES FL 33134

Name Berman Gary L

Street Address (P.O. Box Number is Not Acceptable)

2332 Galiano Street

City Coral Gables

FL

Zip Code

33134

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, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPT ☐ Delete
NAME Berman, GARY L.
STREET ADDRESS 201 ALHAMBRA CIRCLE, STE. 804
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE D ☐ Delete
NAME Berman, VALERIE S
STREET ADDRESS 201 ALHAMBRA CIRCLE, STE. 804
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2332 Galiano Street
CITY-ST-ZIP Coral Gables, FL 33134

TITLE ☒ Change ☐ Addition
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STREET ADDRESS 2332 Galiano Street
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Valerie S. Berman

Valerie S. Berman

3/29/05

(305)669-3900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #