2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000092213

Entity Name
MARR MIAMI INVESTMENTS, INC.

Principal Place of Business	Mailing Address
14066 NW 82ND AVE MIAMI LAKES, FL 33016	14066 NW 82ND AVE MIAMI LAKES, FL 33016

DO NOT WRITE IN THIS SPACE

03252004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-1070441
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SAMPEDRO, RICHARD
3370 N.E. 190 STREET #2512
AVENTURA, FL 33180

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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: _____ 03/24/04
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, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

OFFICERS AND DIRECTORS

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ADDRESS	SAMPEDRO, RICHARD
CITY-ST-ZIP	8221 CORAL WAY
	MIAMI, FL 33155
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ADDRESS	SAMPEDRO, MANUEL JOSE
CITY-ST-ZIP	8221 CORAL WAY
	MIAMI, FL 33155
ADDRESS	
CITY-ST-ZIP	
ADDRESS	
CITY-ST-ZIP	
ADDRESS	
CITY-ST-ZIP	
ADDRESS	
CITY-ST-ZIP	

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03/29/04-80024-021 150.00

DO NOT WRITE IN THIS SPACE

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: _____ 03/24/2004 305-6989593
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #