## 2007 FOR PROFIT CORPORATION

CITY-ST-ZIP

SIGNATURE:

changed, or on an attachment with an address, with all other like impowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 26, 2007 8:00 am Secretary of State **ANNUAL REPORT** 04-26-2007 90203 048 \*\*\*150.00 DOCUMENT # P00000092213 1. Entity Name MARR MIAMI INVESTMENTS, INC. Principal Place of Business Mailing Address 2400 BISCAYNE BLVD 2400 BISCAYNE BLVD MIAMI, FL 33137 MIAMI, FL 33137 04232007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1070441 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SAMPEDRO, RICHARD DO NOT WRITE 3370 N.E. 190 STREET #2512 AVENTURS, FL 33180 IN THIS SPACE 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. 04-23-07 DATE SIGNATUR or printed name of registered agent and titla if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10 TITLE SAMPEDRO, RICHARD NAME STREET ADDRESS 8221 CORAL WAY MIAMI, FL 33155 CITY-ST-ZIP SAMPEDRO, MANUEL JOSE NAME 8221 CORAL WAY STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33155 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

FILED