


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90345 046 ***150.00

DOCUMENT # P01000069530

1. Entity Name
MRMF, INC.



Principal Place of Business
~~2130 N.W. 7TH AVENUE~~ **2100 NW 8 Ave**
 MIAMI, FL 33127

Mailing Address
~~2130 N.W. 7TH AVENUE~~ **2100 NW 8 Avenue**
 MIAMI, FL 33127



04112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1132836	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JORGE, ROSA G
~~2130 N.W. 7TH AVENUE~~ **2100 NW 8 Avenue**
 MIAMI, FL 33127

DO NOT WRITE 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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JORGE, ROSA G 2130 N.W. 7TH AVENUE 2100 NW 8 Avenue MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ACOSTA, JOSE F 2130 N.W. 7TH AVENUE MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD & Treasurer VERDEJA, MARIO J 2130 N.W. 7TH AVENUE 2100 NW 8 Avenue MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VERDEJA, MARIO JR 2130 NW 7TH AVE 2100 NW 8 Avenue MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/05 (305-970-1136)
 Date Daytime Phone #