

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000004909

FILED
Aug 10, 2009
Secretary of State**Entity Name:** MIC-MRV INTERNATIONAL CORPORATION**Current Principal Place of Business:**13899 BISCAYNE BLVD
SUITE 154
NORTH MIAMI BEACH, FL 33181**New Principal Place of Business:****Current Mailing Address:**1110 BRICKELL AVENUE, SUITE 310
MIAMI, FL 33131**New Mailing Address:****FEI Number:** 38-3671862**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NS CORPORATE SERVICES INC.
1110 BRICKELL AVENUE, SUITE 310
MIAMI, FL 33131 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TEIXEIRA DE SOUZA, RUBENS MENIN
Address: 4000 WILLIAMS ISLAND BLVD. #2304
City-St-Zip: AVENTURA, FL 33160

Title: DVP () Delete
Name: PINHEIRO MENIN, MARIO LUCIO
Address: 4000 WILLIAMS ISLAND BLVD. #2304
City-St-Zip: AVENTURA, FL 33160

Title: VPS () Delete
Name: PAIVA, LEANDRO
Address: 13899 BISCAYNE BLVD, SUITE 154
City-St-Zip: N. MIAMI BEACH, FL 33181

Title: VP () Delete
Name: DE SOUZA, SERGIO FISCHER
Address: 13899 BISCAYNE BLVD, SUITE 154
City-St-Zip: N. MIAMI BEACH, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP (X) Change () Addition
Name: CARVALHO LACERDA, HORACIO F
Address: 13899 BISCAYNE BLVD, SUITE 154
City-St-Zip: N. MIAMI BEACH, FL 33181

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

SIGNATURE: SOUZA

D

08/10/2009

Electronic Signature of Signing Officer or Director

Date