

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2007 8:00 am
Secretary of State

02-07-2007 90050 026 ***150.00

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1. Entity Name

MARR BUILDING ASSOCIATION, CORP.



Principal Place of Business

**2128 W. FLAGLER ST
105
MIAMI, FL 33125**

Mailing Address

**2128 W. FLAGLER ST
105
MIAMI, FL 33125**

DO NOT WRITE IN THIS SPACE



01162007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0348214

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NOEL, RUIZ
750 NW 43RD AVE., APT. 517
MIAMI, FL 33126**

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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

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, 2007 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
MUSE, LAZARO
121 SW 72ND AVE.
MIAMI, FL 33144**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
RIVERO, DANNY
3135 NW 1ST ST.
MIAMI, FL 33125**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
RUIZ, NOEL
6770 SW 48 ST
MIAMI, FL 33155**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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 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

2/20/07

Date

(305) 681 6668

Office Phone #