

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000034798

Entity Name: M.R. 908 CORPORATION

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

18660 COLLINS AVE  
SUNNY ISLES BCH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

2655 LEJEUNE RD STE 508  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

FEI Number: 20-2491779

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AURORA PENALVER, ESQ  
2655 LEJEUNE RD STE 508  
CORAL GABLES, FL 33134 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  
Name: ESCUDERO, JULIO  
Address: 18660 COLLINS AVE  
City-St-Zip: SUNNY ISLE BCH, FL 33160

Title: VP  
Name: KOSBERG, ROXANNE  
Address: 2655 LEJEUNE RD STE 508  
City-St-Zip: CORAL GABLES, FL 33134

Title: S  
Name: PENALVER, AURORA  
Address: 2655 LEJEUNE RD STE 508  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: AURORA PENALVER, ESQ.

RA

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date