

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000056529

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** RISK MONDIAL INVESTIGATIVE & RECOVERY, INC.

**Current Principal Place of Business:**

1620 SW75TH AVENUE  
PEMBROKE PINES, FL 33023

**New Principal Place of Business:**

1001 W. CYPRESS CREEK  
SUITE #103  
FT. LAUDERDALE, FL 33309

**Current Mailing Address:**

1620 SW75TH AVENUE  
PEMBROKE PINES, FL 33023

**New Mailing Address:**

1001 W. CYPRESS CREEK  
SUITE #103  
FT. LAUDERDALE, FL 33309

**FEI Number:** 27-2992292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCMENAMIN, THOMAS J IV  
1620 SW 75TH AVENUE  
PEMBROKE PINES, FL 33023 US

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

MCMENAMIN, THOMAS J IV  
1001 W. CYPRESS CREEK  
SUITE #103  
FT. LAUDERDALE, FL 33309 US

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:

03/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MCMENAMIN, THOMAS J IV  
Address: 1001 W. CYPRESS CREEK SUITE 103  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: VP  
Name: PAPA, ALBERT  
Address: 1001 W. CYPRESS CREEK SUITE 103  
City-St-Zip: FT. LAUDERDALE, FL 33309

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: T. MCMENAMIN

PRES

03/15/2011

Electronic Signature of Signing Officer or Director

Date