

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000021669

FILED
May 13, 2004
Secretary of State

Entity Name: M.R. & SON INVESTMENT CO. INC.

Current Principal Place of Business:

4574 E. MICHIGAN ST.
ORLANDO, FL 32812 US

New Principal Place of Business:

4000 PONCE DE LEON BLVD.
470
CORAL GABLE, FL 33146 US

Current Mailing Address:

4574 E. MICHIGAN ST.
ORLANDO, FL 32812 US

New Mailing Address:

POBOX 450531
KISSIMMEE, FL 34745 US

FEI Number: 65-0471150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERS, MANNY
151 N ORLANDO AVE
UNIT 249
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

FITERRE, IGNACIO
4000 PONCE DE LEON BLVD.
470
CORAL GABLE, FL 33146 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: IGNACIO FITERRE

05/13/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RIVERS, MANNY
Address: 151 ORLANDO AVE
City-St-Zip: WINTER PARK, FL 32789

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RIVERS, KIETH
Address: 151 ORLANDO AVE
City-St-Zip: WINTER PARK, FL 32789

Title: SEC () Change (X) Addition
Name: FITERRE, IGNACIO
Address: 4000 PONCE DE LEON BLVD. #470
City-St-Zip: CORAL GABLE, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KIETH RIVERS

PRES

05/13/2004

Electronic Signature of Signing Officer or Director

Date