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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000052954 (1)

M.R.P. INC.

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FILED

Mar 02 1998 8:00am

Secretary of State

Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. S. Certificate of Status Desired S8.75 Additional Fee Required
MIAMI FL 33129 MIAMI FL 33129
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2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Mol. Applied For 65-0598480 Not Applicable Suite, Apt. #i. etc. Suite, Apt. #ii. etc. Suite, Apt. #ii. etc. Suite, Apt. #iii.
2. Principal Place of Business
27 Suite, Apt. #, etc. City & State Country Zip Country B. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes \ No PARIENTE, ROBERTO 1541 BRICKELL AVENUE #C-407 MIAMI FL 33129 83 Signature, specific or insignation of Sections 607.0502 and 607.1508, Florids Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent and familiar with, and accept the obligations of, Section 607.0505, Florids Statutes. SIGNATURE Signature, specific presents name of registered agent and file if agrenable. Directors Not Registered Agent signature required when remarking) DATE Signature, specific presents name of registered agrentable. PARIENTE, ROBERTO 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DIRECTORS DELETE 1.1 TITLE DELETE 2.1 NAME DELETE 2.1 TITLE Contage Addition Addi
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28 Trust Fund Contribution Added to Fees
Zip Country Zip Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No No PARIENTE, ROBERTO 1541 BRICKELL AVENUE #C-407 MIAMI FL 33129 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12.
24
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
PARIENTE, ROBERTO 1541 BRICKELL AVENUE #C-407 MIAMI FL 33129 81
1541 BRICKELL AVENUE #C-407 MIAMI FL 33129 82 Street Address (P.O. Box Number is Not Acceptable) 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or pretided name of registered agent and title if approache. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PARIENTE, ROBERTO 1.2 NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33129 DELETE 1.1 TITLE DELETE 2.1 TITLE Addition Addition
#C-407 MIAMI FL 33129 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if approachle. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME PARIENTE, ROBERTO 1.2 NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33129 1.4 CITY-ST-ZIP DELETE 2.1 TITLE DELETE 2.1 TITLE Addition Addition
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SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME PARIENTE, ROBERTO STREET ADDRESS CITY-ST-ZIP MIAMI FL 33129 DELETE DELETE DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33129 DELETE DELETE DELETE 2.1 TITLE 2.2 NAME 1.4 CITY-ST-ZIP NAME 2.2 NAME 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition Addition Addition
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14. I hereby certify that the information supplied within this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or superfinental a mual 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 trutate empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change of or on an attachment with an address.

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CIGNATURE.