

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90131 048 ***150.00

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DOCUMENT # P95000052954

1. Entity Name
M.R.P. INC.



Principal Place of Business
1541 BRICKELL AVENUE
#C-407
MIAMI FL 33129

Mailing Address
1541 BRICKELL AVENUE
#C-407
MIAMI FL 33129



2. Principal Place of Business
1350 PENNSYLVANIA AVE

Suite, Apt. #, etc.
#201

3. Mailing Address
1350 PENNSYLVANIA AVE

Suite, Apt. #, etc.
#201

☐ CHECK HERE IF MAKING CHANGES

City & State
MIAMI BEACH, FL

City & State
MIAMI BCH, FL

4. FEI Number 65-0598480

Applied For
Not Applicable

Zip 33139 Country DADE

Zip 33139 Country DADE

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PARIENTE, ROBERTO
1541 BRICKELL AVENUE
#C-407
MIAMI FL 33129

Name

Street Address (P.O. Box Number is Not Applicable)
1350 PENNSYLVANIA AVE
#201

City MIAMI BCH FL Zip 33139

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 _____ (NOTE: Registered Agent Signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME PARIENTE, ROBERTO
STREET ADDRESS 1541 BRICKELL AVENUE / #C-407
CITY-ST-ZIP MIAMI FL 33129 ☐ Delete

TITLE
NAME 1350 PENNSYLVANIA AVE
STREET ADDRESS MIAMI BCH, FL 33139 ☒ Change ☐ Addition

TITLE P
NAME PARIENTE, ROBERT
STREET ADDRESS 1541 BRICKELL AVE., #407
CITY-ST-ZIP MIAMI FL 33129 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME POSSCHELLE, GUY
STREET ADDRESS 4210 BRACANTA ST.
CITY-ST-ZIP COCONUT GROVE FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with 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 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT S. PARIENTE 4/28/03

Date Daytime Phone #

CR2E034 (10/02)