

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 675891**



Entity Name  
**MARPA ENTERPRISE, INC.**

Principal Place of Business  
**6998 NW 51ST ST  
 MIAMI, FL 33166**

Mailing Address  
**6998 NW 51ST ST  
 MIAMI, FL 33166**



01172006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **59-2034660** Applied For  
 Not Applicable  
 5. Certificate of Status Desired  **\$8.75** Additional  
 Fee Required

**6. Name and Address of Current Registered Agent**

**PAGES, MARIO  
 6998 N.W. 51ST STREET  
 MIAMI, FL 33166**

**DO NOT WRITE  
 IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00**

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

100000397751  
 01/30/06 80054-001 150.00

**OFFICERS AND DIRECTORS**

VPD	PAGES, ROBERT F.	
STREET ADDRESS	6998 NW 51ST ST	
CITY-ST-ZIP	MIAMI, FL	
PD	PAGES, MARIO A	
STREET ADDRESS	6998 NW 51ST ST	
CITY-ST-ZIP	MIAMI, FL	

**DO NOT WRITE  
 IN THIS SPACE**

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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:**

**Mario A. Pages**

**1.17.06**

**305.594 1145**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #