


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4/26/2005-90183-027-\$61.25-\$61.25

JUN 10 2005

FILED
05 JUN -9 AM 11:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 729992			
1. Entity Name MARINA DEL MAR, INC.			
Principal Place of Business 1500-1510 SE 15TH STREET FORT LAUDERDALE, FL 33316		Mailing Address 6915 TAFT STREET HOLLYWOOD, FL 33024 US	
2. Principal Place of Business		3. Mailing Address C/O USA SERVICES	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 2771 TREASURE COVE CR.	
City & State		City & State Fort Lauderdale, FL	
Zip	Country	Zip	Country
33312	USA	33312	BROWARD
4. FEI Number 59-1593404		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SHAPIRO, PAUL J 7400 NW 51 STREET LAUDERHILL, FL		Name SHAPIRO, PAUL	
		Street Address (P.O. Box Number is Not Acceptable) 2771 TREASURE COVE CIRCLE	
		City Fort Lauderdale	FL Zip Code 33312
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 <i>Paul Shapiro</i>		DATE 4/13/05	
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE D - VP	NAME COLBERT, PETER	TITLE D	NAME FARLEY CARNEY
STREET ADDRESS 1510 SE 15TH ST	CITY-ST-ZIP FORT LAUDERDALE, FL 33316	STREET ADDRESS 1500 SE 15TH ST	CITY-ST-ZIP FT LAUDERDALE FL 33316
TITLE D - Pres.	NAME ZMURCHAK, AL	TITLE D	NAME NORMA CARROLL
STREET ADDRESS 1500 SE 15TH STREET	CITY-ST-ZIP FORT LAUDERDALE, FL 33316	STREET ADDRESS 1510 SE 15TH ST	CITY-ST-ZIP FT. LAUDERDALE FL 33316
TITLE D - SEC / TREASURER	NAME ZMUCHAK, RACHEL	TITLE	NAME
STREET ADDRESS 1500 SW 15TH ST.	CITY-ST-ZIP FORT LAUDERDALE, FL 33316	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
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 617, 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 empowerment.			
SIGNATURE: <i>Rachel Zmurchak</i>		DATE: 4/21/05 954 764 5045	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR RACHEL ZMURCHAK		DATE	