2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000018693

1. Entity Name

MARILU ENTERPRISES, INC.



FILED
May 03, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

2265 N.W. 20TH STREET MIAMI, FL

2265 N.W. 20TH STREET MIAMI, FL



04262007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0989271 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEE, YUNG 2265 N.W. 20TH STREET MIAMI, FL

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				•		
	named entity submits this statement for the piions of registered agent.	urpose of changing its registere	ed office or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title	Landicable (NOTE Bagginger	Apont expeture	required when reinstating)	DATE	
	Signature: typed or printed name or registered agent and line	rapplication (NOTE riegistered	Agent agnature	required wilein remarking)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE Name Street address City-St-Zip	PD LEE, YUNG 6904 SW 88TH STREET, # 303 MIAMI, FL 33156				U00000759143 05/24/07-80030-018 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LEE, ELIZABETH 6904 SW 88TH STREET, # 303 MIAMI, FL					
TITLE NAME STREET ADDRESS				5.0	NOT WOITE	

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12. 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 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:

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
GITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

JACO

YUNG LEE

PRESIDENT

04/06/2007

(305) 636 1966

Davime Phone #