


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000034319
 1. Entity Name
THE MARISA GROUP WAREHOUSES, INC.



Principal Place of Business 6813 S W 81ST STREET STE A MIAMI, FL 33143	Mailing Address 6813 S W 81ST STREET STE A MIAMI, FL 33143
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DO NOT WRITE IN THIS SPACE



01142008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1091491	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**LISTA, WALTER L
 12961 DEVA STREET
 CORAL GABLES, FL 33156**

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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: _____ DATE: _____
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

00000733887
 01/30/08-80046-013 150.00

10. OFFICERS AND DIRECTORS

TITLE P	NAME LISTA, WALTER L
STREET ADDRESS 12961 DEVA ST	CITY-ST-ZIP MIAMI, FL 33156
TITLE S	NAME LISTA, MARTA V
STREET ADDRESS 12961 DEVA ST.	CITY-ST-ZIP MIAMI, FL 33156
TITLE T	NAME EDWARDS, ISABEL L
STREET ADDRESS 11951 SW 124 TERRACE	CITY-ST-ZIP MIAMI, FL 33186
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME
STREET ADDRESS	CITY-ST-ZIP

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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: *J Edwards* Treasurer 1/2/08 305 665 7765
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #