2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 15, 2005 08:00 AM Secretary of State DOCUMENT # P03000140981 . 1. Entity Name MATTHEW T. MARKS INC. Principal Place of Business Mailing Address 7908 SEBASTIAN ROAD 7908 SEBASTIAN ROAD FT. PIERCE, FL 34951 FT. PIERCE, FL 34951 03312005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0442591 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 5. Name and Address of Current Registered Agent MARKS, MATTHEW T DO NOT WRITE 7908 SEBASTIAN ROAD FT. PIERCE, FL 34951 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE MARKS, MATTHEW T NAME 7908 SEBASTIAN ROAD STREET ADDRESS CITY-ST-ZIP FT. PIERCE, FL 34951 U00000307056 TITLE 04/15/05-80039-019 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 cath, 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: MUTLAN 7: MULL PUTT HEW 1, WITCH SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

1/10/05 4/64-2619

FILED