

2005 FOR PROFIT CORPORATION ANNUAL REPORT

5 **FILED**
Jun 20, 2005 8:00 am
Secretary of State

05-04-2005 90157 030 ***150.00

DOCUMENT # P04000137447
 1. Entity Name
MAREY ENTERPRISES CORP.



Principal Place of Business
5531 NW 112TH AVE., #114 MIAMI, FL 33178

Mailing Address
5531 NW 112TH AVE., #114 MIAMI, FL 33178

66023439



2. Principal Place of Business
13868 SW 53 Street

3. Mailing Address
13868 SW 53 Street

Suite, Apt. #, etc.

04202005 Chg-P CR2E034 (10/03)

City & State
Miramar, FL

City & State
Miramar, FL

Zip **33027** Country **USA** Zip **33027** Country **USA**

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LUGO, MARGARITA
5531 NW 112TH AVE., #114 MIAMI, FL 33178

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable)
13868 SW 53 Street

City **Miramar** FL Zip Code **33027**

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 Margarita Lugo Olant 20 5/25/05
Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered agent signature required when releasing) DATE

FILE NOW!!! FEE IS \$180.00 After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD LUGO, MARGARITA 5531 NW 112TH AVE., #114 MIAMI, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13868 SW 53 Street Miramar, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD PAREDES, REYNALDO S 5531 NW 112TH AVE., #114 MIAMI, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13868 SW 53 Street Miramar, FL 33027
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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: Olant 20 Margarita Lugo 5/25/05 305 819585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Overage Phone #