

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000050439

Entity Name: MARS MARKET, INC.

FILED
Feb 18, 2009
Secretary of State

Current Principal Place of Business:

6410 SUNSET STRIP
SUNRISE, FL 33313

New Principal Place of Business:

Current Mailing Address:

6410 SUNSET STRIP
SUNRISE, FL 33313

New Mailing Address:

FEI Number: 20-2685231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, LIAN'A ESQ
326 NE 29TH STREET
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RAHMAN, MAHBUBUR
Address: 6920 NOVA DR #206
City-St-Zip: DAVIE, FL 33317

Title: DV () Delete
Name: AZAMAN, AMIR
Address: 8430 SW 39 COURT
City-St-Zip: DAVIE, FL 33328

Title: DST () Delete
Name: ARA, NARGIS
Address: 7000 NOVA DR #205-E
City-St-Zip: DAVIE, FL 33317

Title: D () Delete
Name: CHOUDHURY, SUBARNA R
Address: 10424 SW 54 ST
City-St-Zip: COOPER CITY, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAHBUBUR RAHMAN

PD

02/18/2009

Electronic Signature of Signing Officer or Director

Date