


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90268 008 \*\*\*150.00

DOCUMENT # P06000046022			
1. Entity Name MARSHALL & GREGORY II, INC.			
Principal Place of Business 1518 IVES DAIRY ROAD MIAMI, FL 33179		Mailing Address 1518 IVES DAIRY ROAD MIAMI, FL 33179	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent MARSHALL, CHERRY 733 NW 49TH COURT LAUDERHILL, FL 33319		7. Name and Address of New Registered Agent Name: MARSHALL, CHERRY Street Address (P.O. Box Number is Not Acceptable): 7188 NW 108th AVENUE City: PARKLAND FL 33076 City: PARKLAND FL 33076 City: FL Zip Code	
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: <u>X</u> (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PD NAME: MARSHALL, CHERRY STREET ADDRESS: 733 NW 49TH COURT CITY-ST-ZIP: LAUDERHILL, FL 33319	<input type="checkbox"/> Delete	TITLE: MARSHALL, CHERRY NAME: MARSHALL, CHERRY STREET ADDRESS: 7188 NW 108th Avenue CITY-ST-ZIP: PARKLAND FL 33076	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: SD NAME: MARSHALL, ORAL STREET ADDRESS: 733 NW 49TH COURT CITY-ST-ZIP: LAUDERHILL, FL 33319	<input type="checkbox"/> Delete	TITLE: MARSHALL, ORAL NAME: MARSHALL, ORAL STREET ADDRESS: 7188 NW 108th Avenue CITY-ST-ZIP: PARKLAND FL 33076	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VD NAME: GREGORY, MELONY STREET ADDRESS: 7498 NW 48TH STREET CITY-ST-ZIP: LAUDERHILL, FL 33319	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: TD NAME: GREGORY, MICHAEL STREET ADDRESS: 7498 NW 48TH STREET CITY-ST-ZIP: LAUDERHILL, FL 33319	<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 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: <u>X Cherry Marshall</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		P.D Date: <u>4/17/07</u> Daytime Phone #: <u>X 954-479-1915</u>	



03282007 Chg-P CR2E034 (12/06)

4. FEI Number: 20-8732048 Applied For:  Not Applicable:

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