2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 29, 2005 08:00 AM Secretary of State DOCUMENT # P96000048607 1. Entity Name MARTNI I, INC. Principal Place of Business Mailing Address 5728 MAJOR BLVD 5728 MAJOR BLVD 601 ORLANDO, FL 32819 ORLANDO, FL 32819 02232005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3382993 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE KHATIB, RASHID A 5728 MAJOR BLVD 601 IN THIS SPACE ORLANDO, FL 32819 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) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE DPST NAME KHATIB, RASHID A STREET ADDRESS 5728 MAJOR BLVD 601 1100000342953 CITY-ST-ZIP ORLANDO, FL 32819 04/29/05-80076-008 150.00 TITLE KHOURI, ZAHI W NAME STREET ADDRESS 5728 MAJOR BLVD 601 ORLANDO, FL 32819 CITY-ST-7IP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby 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: _

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED