

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 11, 2004 08:00 AM
Secretary of State

DOCUMENT # 551624

1. Entity Name

MARATHON GREENS, INC.



Principal Place of Business

7278 S. DEVON DRIVE

207

TAMARAC, FL 33321 US

Mailing Address

7278 SO. DEVON DRIVE

207

TAMARAC, FL 33322 US



02032004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1870530

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

HORN, RONALD

7278 S DEVON DRIVE

SUITE 207

TAMARAC, FL 33321

**DO NOT WRITE
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 removing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HORN, RONALD L.
STREET ADDRESS 7278 S. DEVON DR. #207
CITY - ST - ZIP TAMARAC, FL

TITLE SD
NAME HORN, DOROTHY
STREET ADDRESS 7278 S. DEVON DR. #207
CITY - ST - ZIP TAMARAC, FL

TITLE VD
NAME HORN, RONALD L.
STREET ADDRESS 7278 S. DEVON DR., #207
CITY - ST - ZIP TAMARAC, FL

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U000000045760
02/11/04-80076-011 150.00

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IN THIS SPACE**

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:

Dorothy Horn DOROTHY HORN 2/9/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-721-2742