

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 628730

FILED
Apr 06, 2009
Secretary of State

Entity Name: MARCENT FLORIDA INC.

Current Principal Place of Business:

5401 S. KIRKMAN ROAD
SUITE 650
ORLANDO, FL 328197912

New Principal Place of Business:

Current Mailing Address:

5401 S. KIRKMAN ROAD
SUITE 650
ORLANDO, FL 328197912

New Mailing Address:

FEI Number: 59-1924413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLER, KATHLEEN
5401 S. KIRKMAN ROAD, SUITE 650
ORLANDO, FL 328197912 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: C () Delete
Name: MAYER, RINA
Address: 21 RUE DU MONT BLANC
City-St-Zip: GENEVA, SW

Title: DP () Delete
Name: LEITERSDORF, JONATHAN
Address: 21 RUE DU MONT BLANC
City-St-Zip: GENEVA, SW

Title: DV () Delete
Name: KURZ, PIERRE
Address: 21 RUE DU MONT BLANC
City-St-Zip: GENEVA, SW

Title: D () Delete
Name: BOURGER, DOMINIQUE
Address: 21 RUE DU MONT BLANC
City-St-Zip: GENEVA, SW

Title: ST () Delete
Name: KELLER, KATHLEEN
Address: 5401 S. KIRKMAN RD, #650
City-St-Zip: ORLANDO, FL 328197912

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:

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: KATHLEEN KELLER

ST

04/06/2009

Electronic Signature of Signing Officer or Director

_____ Date