2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

Feb 02, 2007 8:00 am **DOCUMENT # 665383 Secretary of State** 1. Entity Name 02-02-2007 90011 022 ***150.00 MARGIE'S HOUSE, INC. Principal Place of Business Mailing Address 14150 N.W. SIXTH COURT C/O THOMAS DEAN PRESNELL MIAMI FL 33168-6805 14150 N.W. SIXTH COURT C/O THOMAS DEAN PRESNELL MIAMI FL 33168-6805 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 59-1991869 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PRESNELL, THOMAS DEAN Street Address (P.O. Box Number is Not Acceptable) 14150 N.W. SIXTH COURT MIAMI FL City 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 Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Defete HILE Change ☐ Addition PRESNELL, THOMAS DEAN NAME 255 NE 164 STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33162 CITY ST-7IP CITY-ST-ZIP VSD THILE ■ Delete HILE PRESNELL, HONDRAANN Addition ALLENSWORTH, MARGIE NAME NAME. 130NW1235T. 130 NW 123 ST STREET ADDRESS STREET ADDRESS N MIAMI FL No. HIAMI, Fl. 33168 CITY - ST - 7IP CHY-S1-7IP TD Delete ☐ Change ■ Addition PRESNELL, HONORA NAME 255 N E 164 STREET STREET ADDRESS STREET ADDRESS **MIAMI FL 33162** CITY ST- ZIP CITY-SE-71P IIIŒ Delete IIILE ☐ Change ■ Addition PRESNELL, LAUREL L NAME NAME 130 NW 123 ST STREET ADDRESS STREET ADDRESS **MIAMI FL 33168** CITY - S1 - 7IP CITY-ST-ZIP Change ☐ Delete HITE ☐ Addition DID NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ■ Addition TUTLE Delete NAME NAM STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-7tP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos, 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 trusted 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 open attachment with air address, with all other like empowered.

HONDRA PRESNEU

FILED