2007 LIMITED PARTNERSHIP ANNUAL REPORT

FILED Due By May 1, 2007 Mar 12, 2007 08:00 AM DOCUMENT # A0400001790 **Secretary of State** 1. Entity Name MARLIN VI, LTD. Principal Place of Business Mailing Address 2431 SW 28TH AVE 2431 SW 28TH AVE FORT LAUDERDALE, FL 33312 FORT LAUDERDALE, FL 33312 01082007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1926847 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent JONATHAN H. GREEN & ASSOCIATES, P.A. DO NOT WRITE 799 BRICKELL PLAZA, SUITE 700 MIAMI, FL 33131 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. 000000664371 FILE NOWI!! FEE IS \$500.00 03/22/07-80042-008 500.00 After May 1, 2007, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER INFORMATION P04000156179 DOCUMENT # NAME MARLIN VI, INC. 2431 SW 28TH AVE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33312 DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information inclicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this peport as required by Chapter 620, Florida Statutes

SIGNATURE:

CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP

TED OR PRINTED NAME OF SIGNING GENERAL PARTNER