

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005950

Entity Name: MARJACK CONCESSIONS INC

FILED
Apr 22, 2004
Secretary of State

Current Principal Place of Business:

P.O. BOX 8030
LANGLEY PARK, MD 20787

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8030
LANGLEY PARK, MD 20787

New Mailing Address:

FEI Number: 53-0186548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCEO () Delete
Name: COOPERSMITH, WARREN S
Address: 3803 VILLAGE PARK DR
City-St-Zip: CHEVY CHASE, MD 20815

Title: VSCO () Delete
Name: KNEPPRATH, BRADLEY A
Address: 13507 ALLNUT LN
City-St-Zip: HIGHLAND, MD 20777

Title: VCFO () Delete
Name: MAYN, ROBERT A
Address: 5929 GRIFFITH RD
City-St-Zip: LAYTONSVILLE, MD 20882

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT A MAYN

VCFO

04/22/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date