2008 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # F03000003867 MARKEN LIMITED CORPORATION

FILED Apr 17, 2008 08:00 All Secretary of State

Principal Place of Business

3 BRENTWATERS BUSINESS PARK BRENTFORD, MIDDLESEX, UK TW8--HQ Mailing Address

266 MERRICK ROAD **SUITE 2000** LYNBROOK, NY 11563



CR2E034 (11/05) 01112008 No Chg-P

Applied For 4. FEI Number 95-4288781 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY

DO NOT WRITE

TALLAHASSEE, FL 32301			3 to 2 to	* .	IN	THIS SPACE
	ions of registered agent.		ed office or re			ooth, in the State of Florida. I am familiar with, and accept
FIL After Ma	Signature, typed or printed name of registered agent and life E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Final Trust Fund Contribution.	ncing	\$5.00 Added to	May Be	-
10.	OFFICERS AND DIREC	CTORS		٠, ۴	***	的复数物质量 网络特别人
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRAIG, BRUCE TIMOTHY 54 OCEAN CLUB ESTATE LAKEVIEV PARADISE ISLAND, BAHAMAS,	V CT		** * *	•	
TITLE NAME SIREET ADDRESS CITY-SI-ZIP	DS MUELLER, SIMON 34 BRIDGEFIELD, FARNHAM GU9 8/ SURREY, UK	AW	*	- 14	*.	U00000903934
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'DRISCOLL, FINIAN N GARSDALE HOUSE, 3 TIMBERLEY PLACE BERKSHIRE, UK 1945 6bb			*•	DC	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				-	IN	THIS SPACE
ITILE NAME STREET ADDRESS CITY-S1-ZIP						

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 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. 144

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIMON MUELLER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4921L 8, 2008

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