2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000967

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

PAMONA, NY 10970

DANGELO, ALDO

31 HORSESHOE DR

HILLSBOROUGH, NJ 08844

() Delete

FILED Feb 01, 2006 Secretary of State

Entity Name: MARTA TRACK CONSTRUCTORS, INC. **Current Principal Place of Business: New Principal Place of Business:** 4390 IMESON ROAD JACKSONVILLE, FL 32219 **Current Mailing Address: New Mailing Address:** 4390 IMESON ROAD JACKSONVILLE, FL 32219 FEI Number: 52-1059261 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CARLIN, JOE COPELAND, PAUL Name: Name: 4390 IMESON ROAD 4390 IMESON ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32219 City-St-Zip: JACKSONVILLE, FL 32219 Title: DST Title: DST () Delete (X) Change () Addition BEAM, GARY Name: Name: ADAM, CLAY 4390 IMESON ROAD 3513 PALO DURO CT Address: Address: JACKSONVILLE, FL 32219 HURST, TX 70654 City-St-Zip: City-St-Zip: () Delete Title: Title: AS () Change () Addition BONFIGLIO, JOANNE Name: Name: 48 DUNNIGAN DR Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ALDO DANGELO AT 02/01/2006

(X) Change () Addition

DANGELO, ALDO

BEDMINSTER, NJ 07921

11 ASHLEY CT