

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2008 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # H06931 1. Entity Name MARATHON PAINTERS, INC. |  |
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| Principal Place of Business % PIERRE BITZANAKIS 365 DESOTO PARKWAY SATELLITE BEACH FL 32937 | Mailing Address % PIERRE BITZANAKIS 365 DESOTO PARKWAY SATELLITE BEACH FL 32937 |
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|---|---|
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
|---|---|

1st MOORE CR2E034 (10/07)

| | | | |
|--------------|--------------|------------------------------------|--|
| City & State | City & State | 4. FEI Number 59-2418637 | Applied For <input type="checkbox"/> Not Applicable |
|--------------|--------------|------------------------------------|--|

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|-----|---------|-----|---------|---|
| Zip | Country | Zip | Country | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |
|-----|---------|-----|---------|---|

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| 6. Name and Address of Current Registered Agent BITZANAKIS, PIERRE 365 DESOTO PARKWAY SATELLITE BEACH FL 32937 | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |
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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 _____ DATE _____
(Signature, typed or printed name of registered agent and title, if not applicable. (NOTE: Registered Agent signature required when submitting.)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00.
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|----------------------------|--|
| TITLE | DP <input type="checkbox"/> Delete BITZANAKIS, PIERRE 365 DESOTO PARKWAY SATELLITE BEACH FL 32937 |
| TITLE | VTS <input type="checkbox"/> Delete BITZANAKIS, DIMITRIOS 365 DESOTO PARKWAY SATELLITE BEACH FL 32937 |
| TITLE | <input type="checkbox"/> Delete |
| TITLE | <input type="checkbox"/> Delete |
| TITLE | <input type="checkbox"/> Delete |
| TITLE | <input type="checkbox"/> Delete |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|--|
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP |
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UN00000871800
04/10/08-800006-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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, when all other laws empowered.

SIGNATURE:  **03-24-08 321-779-3777**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #