


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 09, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # K33753</b> 1. Entity Name <b>MARCO POLO REALTY, INC.</b>	
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Principal Place of Business 2400 S. W. HWY 484 OCALA, FL 34473 US	Mailing Address 2400 S. W. HIGHWAY 484 OCALA, FL 34473 US
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<b>DO NOT WRITE IN THIS SPACE</b>
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02072007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-2909776</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  POWERS, ALBINA 4260 SW 58TH AVE OCALA, FL 34474
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP POWERS, ALBINA 4260 SW 58TH AVE OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PAVICIC, KATICA (2ND) 3310 SW 58TH STREET OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V POWERS, LANCE 4260 SW 58TH AVE OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>1000000630604 02/20/07-80013-024 150.00</p> <b>DO NOT WRITE IN THIS SPACE</b>
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12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: KATICA PAVICIC 02/11/2007 352-347-1888  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #