

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024008

Entity Name: MARLEE, LLC

FILED  
Apr 25, 2005  
Secretary of State

**Current Principal Place of Business:**

6001-21 ARGYLE FOREST BLVD.  
#254  
JACKSONVILLE, FL 32244 US

**New Principal Place of Business:**

**Current Mailing Address:**

6001-21 ARGYLE FOREST BLVD  
#254  
JACKSONVILLE, FL 32244 US

**New Mailing Address:**

FEI Number: 75-3082908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MAJIED, KATHERINE  
6001-21 ARGYLE FOREST BLVD.  
#254  
JACKSONVILLE, FL 32244 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

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: MAJIED, KATHERINE  
Address: 6001-21 ARGYLE FOREST BLVD. #254  
City-St-Zip: JACKSONVILLE, FL 32244

Title: MGRM ( ) Delete  
Name: MAJIED, HANAN  
Address: 6001-21 ARGYLE FOREST BLVD., #254  
City-St-Zip: JACKSONVILLE, FL 32244

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MAJIED, KATHERINE  
Address: 6001-21 ARGYLE FOREST BLVD. #254  
City-St-Zip: JACKSONVILLE, FL 32244

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KATHERINE MAJIED

MGRM

04/25/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date