

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050342

Entity Name: MARVEL REAL ESTATE LLC

FILED
Jan 17, 2009
Secretary of State

Current Principal Place of Business:

1881 NE 26 STREET
SUITE 212
FORT LAUDERDALE, FL 33305

New Principal Place of Business:

Current Mailing Address:

1844 NORTH NOB HILL ROAD
SUITE 173
PLANTATION, FL 33322

New Mailing Address:

FEI Number: 26-0091244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARENBERG, SCOTT
18844 N NOB HILL RD,
173
PLANTATION, FL 33322 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/MANAGERS:

Title: P () Delete
Name: ARENBERG, SCOTT
Address: 1844 N NOB HILL RD, STE 173
City-St-Zip: PLANTATION, FL 33322

Title: V () Delete
Name: ARENBERG, ELLEN Z
Address: 1844 N NOB HILL RD, STE 173
City-St-Zip: PLANTATION, FL 33322

Title: S () Delete
Name: ARENBERG, ELAYNE
Address: 1844 N NOB HILL RD, STE 173
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: ARENBERG, ELLEN K
Address: 1844 N NOB HILL RD, STE 173
City-St-Zip: PLANTATION, FL 33322

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SCOTT ARENBERG

P

01/17/2009

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