## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 17, 2006 8:00 am DOCUMENT # L09383 **Secretary of State** MARLA INVESTMENTS CORP. 01-17-2006 90241 041 \*\*\*150.00 Principal Place of Business Mailing Address 9546 S.W. 137TH AVENUE 9546 S.W. 137TH AVENUE MIAMI, FL 33183 MIAMI, FL 33183 01062006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0172696 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FERNANDEZ, MARLA DO NOT WRITE 9546 S.W. 137TH AVENUE MIAMI, FL 33183 IN THIS SPACE 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. Signature, typed or granted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE FERNANDEZ, MARLA NAME STREET ADDRESS 9546 S.W. 137TH AVENUE CITY - ST- ZIP MIAMI, FL 33183 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME: STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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: SIGNATURE AND STATE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS CITY-ST-ZIP

01-12/06 (305)382-313

FILED

Caytime Pt