2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 17, 2006 8:00 am Secretary of State

DOCUMENT # L14959 1. Entity Name MAROMAR INTERNATIONAL FREIGHT FORWARDERS INC.							01-17-2006	90265 04	3 ***150	0.00
Principal Plac	e of Busines	 S	Mailing Address		L	- •	٠			
7016 NW 50 ST. P.O. BOX 526245 MIAMI, FL 33122 MIAMI, FL 33152-6							٠.			•
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2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01112006	Chg-P	CR2E03	14 (11/05)	
City & State		City & State			4. FEI Number 65-0144				optied For ot Applicable	
Zip Country		Country	Zip Country		ntry		Status Desired		8.75 Add	ditional
	6. Name	and Address of Curren	t Registered Agent		Τ	7. Name and A	Address of New R			
			<u> </u>		Name					
BARTH, MARTA 885 LAKE DR MIAMI, FL 33166					Street Addre	ss (P.O. Box Number	P.O. Box Number is Not Acceptable)			
	4									
û.					City			FL	Zip Code	6
8. The above the obligat	named entitions of regis:	y submits this statement (tered agent.	for the purpose of changing	its register	red office or regi	istered agent, or both	, in the State of Flo	orida. I am fa	emiliar with,	and accept
SIGNATURE_	Signature, typed	or printed name of registered ager	at and title if applicable. (NOTE: Benieters	ed Agent signature req		<u> </u>	0.25		
				NO . C. Hogester	on where will mine and	quired when reinstating)		DATE		
After Ma		FEE IS \$150.00 6 Fee will be \$550	9. Election Carr Trust Fund C	npaign Fina	ncing _ :	\$5.00 May Be Added to Fees				
After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 6 Fee will be \$550 OFFICERS AND	9. Election Can Trust Fund C	npaign Final contribution.	ncing (\$5.00 May Be Added to Fees	HANGES TO OFF		DIRECTORS	S IN 11
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2. Thereby bertiny that the information supplied with this iting does not quality 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.

01-11-06 Date 3055942290

MARTA BARTA

SIGNATURE: _