

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L75126

FILED
Jul 06, 2004
Secretary of State

Entity Name: MARED HOLDINGS CORPORATION

Current Principal Place of Business:

C/O MAURICIO J. SIMAN
306 ALCAZAR AVENUE, SUITE 303
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

C/O MAURICIO J. SIMAN
306 ALCAZAR AVENUE, SUITE 303
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0196577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMAN, MAURICIO J.
306 ALCAZAR AVENUE
SUITE 303
CORAL GABLES, FL 33134 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KRONFLE, EDMUNDO A
Address: 306 ALCAZAR AVE., #303
City-St-Zip: CORAL GABLES, FL 33134

Title: ST () Delete
Name: KRONFLE, MARIA
Address: 306 ALCAZAR AVE., #303
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KRONFLE, EDMUNDO A
Address: 306 ALCAZAR AVE., #303
City-St-Zip: CORAL GABLES, FL 33134

Title: DST (X) Change () Addition
Name: KRONFLE, MARIA
Address: 306 ALCAZAR AVE., #303
City-St-Zip: CORAL GABLES, FL 33134

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDMUNDO KRONFLE

DP

07/06/2004

Electronic Signature of Signing Officer or Director

Date