2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L96702

FILED Feb 09, 2009 Secretary of State

Entity Na	me: MARIL	YN'S FIRST CORPORATION			
Current P	rincipal Pla	ce of Business:	New Principal Place	of Business:	
	160TH AVEN , FL 33326	NUE US			
Current M	lailing Add	ress:	New Mailing Addres	New Mailing Address:	
	160TH AVEN , FL 33326	NUE US			
FEI Number	: 65-0216671	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address o	f Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	MARILYN 160TH AVEN , FL 33326	NUE US			
	e named enti e of Florida.	ty submits this statement for th	e purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Elect	ronic Signature of Registered A	Agent	Date	
Election Ca	mpaign Financ	cing Trust Fund Contribution ().			
OFFICER	S AND DIR	ECTORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	PST	() Delete	Title: PST	(X) Change () Addition	

MOVITZ, MARILYN, MOVITZ, MARILYN Name: Name: 1396 SW 160TH AVENUE Address: Address: 1396 SW 160TH AVENUE City-St-Zip: SUNRISE, FL 33326 City-St-Zip:

SUNRISE, FL 33326 Title: () Change () Addition

Title: () Delete MOVITZ. MICHELLE Name: Name: Address: 1396 SW 160 AVE Address: SUNRISE, FL 33326 City-St-Zip: 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 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: MICHELLE MOVITZ В 02/09/2009