

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005218

Entity Name: MARINE ANIMAL RESCUE SOCIETY, INC.

FILED  
Jul 28, 2004  
Secretary of State

## Current Principal Place of Business:

3000 NE 145TH STREET  
MARINE LAB  
NORTH MIAMI BEACH, FL 33181

## New Principal Place of Business:

P.O. BOX 833356  
MIAMI, FL 33283

## Current Mailing Address:

3000 NE 145TH STREET  
MARINE LAB  
NORTH MIAMI BEACH, FL 33181

## New Mailing Address:

P.O. BOX 833356  
MIAMI, FL 33283

FEI Number: 65-0728506

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HADJEZ, CRIS  
3000 NE 145TH STREET  
MARINE LAB  
NORTH MIAMI BEACH, FL 33181 US

## Name and Address of New Registered Agent:

HADJEZ, CRIS  
P.O. BOX 833356  
MIAMI, FL 33283 US

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: CRIS HADJEZ

07/28/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D (X) Delete  
Name: PELTON, CRAIG A  
Address: 3000 NE 145TH STREET MARINE LAB  
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: D ( ) Delete  
Name: HADJEZ, CRIS  
Address: 3000 NE 145TH STREET MARINE LAB  
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: D ( ) Delete  
Name: GASTON, ENRIQUE  
Address: 3000 NE 145TH STREET MARINE LAB  
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: D ( ) Delete  
Name: ZAIAS, JULIE DR.  
Address: 3000 NE 145TH STREET MARINE LAB  
City-St-Zip: NORTH MIAMI BEACH, FL 33181

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: HADJEZ, CRIS  
Address: P.O. BOX 833356  
City-St-Zip: MIAMI, FL 33283

Title: D (X) Change ( ) Addition  
Name: GASTON, ENRIQUE  
Address: P.O. BOX 833356  
City-St-Zip: MIAMI, FL 33283

Title: D (X) Change ( ) Addition  
Name: ZAIAS, JULIA DR.  
Address: P.O. BOX 833356  
City-St-Zip: MIAMI, FL 33283

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRIS HADJEZ

D

07/28/2004

Electronic Signature of Signing Officer or Director

Date