

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000031599

FILED  
Mar 06, 2004  
Secretary of State

Entity Name: MARBEL, INC.

**Current Principal Place of Business:**

1923 NE 164TH STREET  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

1923 NE 164TH STREET  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

FEI Number: 65-0994238      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COPPENS, MARINA B  
1923 NE 164TH STREET  
NORTH MIAMI BEACH, FL 33162      US

**Name and Address of New Registered Agent:**

BEKER, GALINA  
1923 NE 164TH STREET  
NORTH MIAMI BEACH, FL 33162      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: GALINA BEKER      03/06/2004  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: COPPENS, MARINA B  
Address: 1923 NE 164 STREET  
City-St-Zip: MIAMI, FL 33162

Title: VP      ( ) Delete  
Name: BEKER, GALINA  
Address: 231 -174TH STREET APT 1614  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP      (X) Change ( ) Addition  
Name: BEKER, GALINA  
Address: 231 -174TH STREET APT 1614  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: MARINA COPPENS      PRES      03/06/2004  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date