07-05-2005 90223 035 ***150.00

P00000070732

2005 FOR PROFIT CORPORATION ANNUAL REPORT

05 JUL 19 AM 10: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000070732

1. Entity Name
MARTO GAS CO., INC.

Principal Place of Business	Mailing Address
490 N STATE ROAD 7 MARGATE, FL 33063	~~6391 VIA VENETIA WAY~~ ~~DELRAY BEACH, FL 33484~~

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: MARGATE Florida
Zip / Country	Zip: 33063 / Country: BRowARD

06062005 Chg-P CR2E034 (10/03)

4. FEI Number: 65-1025955 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GRANER, THOMAS U 301 YAMATO ROAD SUITE 4199 BOCA RATON, FL 33431	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accep the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTORANO, SALVATORE 6391 VIA VENETIA WAY DELRAY BEACH, FL 33484	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addit
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTORANO, CHRISTOPHER 11861 NW 2ND CT. CORAL SPRINGS, FL 33061	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addit
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTORANO, JOCELYNE 11861 NW 2ND CT. CORAL SPRINGS, FL 33061	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addit
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTORANO, AGNES A 6391 VIA VENETIA N. DELRAY BEACH, FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addit
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addit
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addit

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or directo 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Salvatore J. Martorano President 954-474-9
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date 6/24/05 — Daytime Phone #