

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 SEP -2 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000089895

1. Corporation Name

MAREMAR INVESTMENTS INC

2. Principal Office Address

5547 NORTH MILITARY TRL

Suite, Apt. #, etc.

2402

City & State

BOCA RATON

Zip

33496

Country

PALM BEACH

3. Mailing Office Address

5547 NORTH MILITARY TRL

Suite, Apt. #, etc.

2402

City & State

BOCA RATON

Zip

33496

Country

PALM BEACH

200035807822
05/10/04--01050--013 **150.00

**4. Date Incorporated or Qualified
To Do Business in Florida** 09/25/2000

5. FEI Number
65-1042365

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MARUN MARIO

Street Address (P.O. Box Number is Not Acceptable)

5547 NORTH MILITARY TRL

Suite, Apt. #, Etc.

2402

City

BOCA RATON

State
FL

Zip Code
33496

200035807822
09/02/04--01052--007 **150.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 04-28-04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PSD	MARUN, MARIO	5547 NORTH MILITARY TRL #2402	BOCA RATON, FL 33496
VD	MARUN, SANDRA	5547 NORTH MILITARY TRL#2402	BOCA RATON, FL 33496
TD	MARUN, DELIA	5547 NORTH MILITARY TRL#2402	BOCA RATON, FL 33496

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marun Mario

Date 04/28/2004

561-504-4449

Date

Daytime Phone #

CR2E081 (01/04)

KATTOURA & ASSOCIATES, INC.

ACCOUNTING, BOOKKEEPING & TAX SERVICES

1499 West Palmetto Pk Rd, Suite 416
Boca Raton, FL 33432
TEL: (561) 362-0491

P.O. Box 728
Boca Raton, FL 33429
FAX: (561) 394-5134

National Society of Tax Professionals

April 29, 2004

Department Of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

REF: MAREMAR INVESTMENTS, INC.
DOCUMENT #P00000089895

Dears Sirs, Reinstatement Section

The above referenced corporation has never received any notices before at all. We are enclosing the Corporation reinstatement form along with the check in the amount of \$ 150.00 fee . Please accept this annual report as reinstatement for the year 2003.

Although we would like to verify the address currently is the right one as we show in the annual report form.

Thank you for your cooperation in this matter.

If you have any further question, please do not hesitate to contact us.

Sincerely


Andre K Kattoura

Enclosure

Check \$ 150.00 Fee
Annual Report Form 2003