- 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000025720

1. Entity Name

BASKETBALL MARV, INC.



FILED Mar 15, 2007 08:00 AM Secretary of State

Principal Place of Business

7594 SEA FOAM CT BOYNTON BEACH, FL 33437 Mailing Address

7594 SEA FOAM CT

BOYNTON BEACH, FL 33437



DO NOT WRITE IN THIS SPACE

03072007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1131290

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KESSLER, MARVIN 7594 SEAFOAM COURT BOYNTON BEACH, FL 33437

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the p tions of registered agent.	urpose of changing its re	gistered office o	registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title it	f applicable. (NOTE: F	Registered Agent signat	ure required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 / After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT KESSLER, MARVIN 7594 SEA FOAM CT BOYNTON BEACH, FL 33437		* , , , ,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS KESSLER, MARVIN 7594 SEAFOAM COURT BOYNTON BEACH, FL 33437			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	000000666793 03/26/07-80002-011 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	DO	NOT WRITE
TITLE NAME STREET ADDRESS				IN	THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the feceiver 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 if changed, or on an attackment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Markesokk SIGNATURE AND TYPED OR PRINTED NAME OF SI

MARY, KLISEK SIGNING OFFICER OR DIRECTOR 3/12-07 Date

561 7047147