2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000113190

1. Entity Name MARTNI ALAFAYA, INC.



Principal Place of Business

Mailing Address

5728 MAJOR BLVD, STE 601 ORLANDO, FL 32819 5728 MAJOR BLVD, STE 601 ORLANDO, FL 32819

FILED Apr 16, 2004 08:00 AM Secretary of State

CR2E034 (10/03)

Davime Phone #



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6. Name and Address of Current Registered Agent

4. FEI Number	 Applied For
59-3759703	 Not Applicable
5. Certificate of Status Desired	\$8.75 Additional

Fee Required

KHATIB, RASHID A 5728 MAJOR BLVD, STE 601 ORLANDO, FL 32819

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

03192004

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 accept the obligations of registered agent.							
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000116717 04/16/04-80076-015	150.00	
10.	OFFICERS AND DIREC	TORS	· · · · · · · · · · · · · · · · · · ·				
TITLE NAME Street Address City-St-Zip	D KHATIB, RASHID 5728 MAJOR BLVD, STE 601 ORLANDO, FL 32819					. <u>.</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							