## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Feb 08, 2007 8:00 am Secretary of State 02-08-2007 90041 033 \*\*\*150.00 **DOCUMENT # P02000032538** MARK CARON, INC. Principal Place of Business Mailing Address 40011592 56 6TH AVE 56 6TH AVE VERO BEACH, FL 32962 VERO BEACH, FL 32962 No Chg-P CR2E034 (11/05) 01262007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 71-0873485 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARON, MARK DO NOT WRITE 56 6TH AVE VERO BEACH, FL 32960 IN THIS SPACE 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) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE CARON, MARK 56 6TH AVE STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32962 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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 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 eath; that I am an officer or director of the corporation or the receiver primarile empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the rec-changed, or on an attachme

ith all other like empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED