2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000050840

1. Entity Name

MARBLE ARCH INVESTMENTS, INC.

FILED Feb 09, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

260 CRANDON BLVD. SUITE @26 KEY BISCAYNE, FL 33149 260 CRANDON BLVD. SUITE @26 KEY BISCAYNE, FL 33149



01302006 No Chg-P CR2E034 (11/05)

4. FE) Number 45-0478768 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOOD, MARIA C.P.

CORDOBA GOOD, MARIA C P. 260 CRANDON BLVD STE 26 KEY BISCAYNE, FL 33149

SIGNATURE: MARI

DO NOT WRITE IN THIS SPACE

(305)

02/01/2006

361-9800

Daytime Phone #

the deligations of registered agent.						
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE Registered Ager	t signature	required when renstating)	DATE	
	E NOWILL FER IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000427074 02/20/06-80069-012 158.75	
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORDOBA GOOD, MARIA C 260 CRANDON BLVD. SUITE @26 KEY BISCAYNE, FL 33149	, · · ·-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				<u> </u>		
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY -ST-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					:	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					· · :	
12. I hereby certify that the information supplied with this filling 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 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 attaching the highest with an adoptes, with all other like empowered.						

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