

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066247

Entity Name: NEW MARCA, INC

FILED
Jan 27, 2005
Secretary of State

Current Principal Place of Business:

4401 SW 8 ST
MIAMI, FL 33134

New Principal Place of Business:

10760 NW 58 ST
DELIA PLAZA
DORAL, FL 33178

Current Mailing Address:

4401 SW 8 ST
MIAMI, FL 33134

New Mailing Address:

10760 NW 58 ST
DELIA PLAZA
DORAL, FL 33178

FEI Number: 03-0475356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, MARIA
8418 CORAL WAY
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAMIREZ, MARIA
Address: 4401 SW 8 ST
City-St-Zip: MIAMI, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RAMIREZ, MARIA A
Address: 10760 NW 66 ST # 302
City-St-Zip: DORAL, FL 33178

Title: V () Change (X) Addition
Name: MENDEZ, AUREA E
Address: 12338 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAMIREZ MARIA

PD

01/27/2005

Electronic Signature of Signing Officer or Director

Date