2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 30, 2006 08:00 AM Secretary of State DOCUMENT # P02000074908 1. Entity Name MAR-MOR MARKETING, INC. Principal Place of Business Mailing Address 1619 GOLFSIDE VILLAGE CT 1619 GOLFSIDE VILLAGE CT APOPKA, FL 32712 APOPKA, FL 32712 03282006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 82-0555821 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MAJOR, MARY DO NOT WRITE 1619 GOLFSIDE VILLAGE CT APOPKA, FL 32712 IN THIS SPACE 3. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Centribution. Added to Fees 10. OFFICERS AND DIRECTORS 777) F NAME MAJOR, MARY STRUET ADDRESS 1619 GOLFSIDE VILLAGE CT CITY-ST-ZIP APOPKA, FL 32712 TIFLE MAME U00000485664 STREET ADDRESS 04/13/06-80004-006 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP mle IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP urue NAME STREET ADDRESS CITY-ST-ZIP THLE

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 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 or an attachment with an address, with all other like empowered.

SIGNATURE:

MAME STREET ADDRESS CITY-ST-27P

SIGNING OFFICER OR DIRECTOR

FILED