2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081334

City-St-Zip:

SYUNNY ISLES, FR 33160

FILED Mar 17, 2004 Secretary of State

				,	
Entity Nan	ne: MARIJAC, CORP.				
Current Principal Place of Business:			New Principal Place of Business:		
	•		•		
198 NW 79 MIAMI, FL					
Current Mailing Address:			New Mailing Address:		
198 NW 79TH ST			19111 COLLINS AVE		
MIAMI, FL 33150		#2507			
FEI Number: FEI Number Applied For ()		FEI Number Not Applicable (X)		Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name an	Name and Address of New Registered Agent:		
BARBANEI 198 NW 79 MIAMI, FL	TĤ ST				
The above in the State	named entity submits this statement for the ρι of Florida.	urpose of changing	its registered o	office or registered agen	t, or both,
SIGNATUR	E:				
	Electronic Signature of Registered Ager	nt		Date	
Election Cam	paign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:	DP () Delete	Title:	() Change () Addition	
Name:	CASTRO, JACK	Name:			
Address:	1829 WATER RIDGE DR	Address:			
City-St-Zip:	WESTON, FL 33326	City-St-Zip:			
Title:	DV () Delete	Title:	DV (X	() Change () Addition	
Name:	BARBANELL, JOEL	Name:	BARBANELL, JOEL		
Address:	198 NW 79TH ST	Address:	,		
City-St-Zip:	MIAMI, FL 33150	City-St-Zip:	SUNNY ISLES,	FL 33150	
Title:	DS () Delete	Title:	DS (X	Change () Addition	
Name:	BARBANELL, MARISELA	Name:	BARBANELL, N	MARISELA	
Address:	19111 COLLINS AVE #2507	Address:	19111 COLLIN	S AVE #2507	

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.

City-St-Zip: SUNNY ISLES, FL 33160

SIGNATURE: JOEL BARBANELL DV 03/17/2004