2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 28, 2006 8:00 am Secretary of State 04-28-2006 90164 041 ***150.00 DOCUMENT # P02000089968 1. Entity Name MARTNI REALTY, INC. 4000000 Principal Place of Business Mailing Address 5728 MAJOR BLVD STE 601 5728 MAJOR BLVD STE 601 ORLANDO, FL 32819 ORLANDO, FL 32819 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242006 Chg-P CR2E034 (11/05) Applied For City & State City & State 4. FEI Number 22-3866501 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KHATIB, RASHID A Street Address (P.O. Box Number is Not Acceptable) 5728 MAJOR BLVD STE 601 ORLANDO, FL 32819 City Zip Code 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) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change ☐ Defete TITLE Addition TITLE DST KHATIB, RASHID A NAME 5728 MAJOR BLVD STE 601 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-ZIP ☐ Delete TITLE Change Addition VPD NAME NAME Carson Good STREET ADDRESS STREET ADDRESS 174 W Comstock Ave. Ste 114 Winter Park, FL 32789 City-St-ZIP CITY-ST-7IP Change TITLE ☐ Delete TITLE Addition NAME Hodge, Randall R 5728 Major Blvd., Ste 601 NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CHY-ST-ZP Orlando, FL 32819 ☐ Change ☐ Addition TITLE ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADORESS CITY-ST-7IP CITY-ST-7IP 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 it 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 attachment with an address, with all other like expowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

407-354-2200