## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: \_

## May 04, 2007 8:00 am Secretary of State DOCUMENT # P02000122918 1. Entity Name 05-04-2007 90065 007 \*\*\*150 00 MAREA INTERNATIONAL, CORPORATION Principal Place of Business Mailing Address 9990 NW 9ST CIRCLE P.O. BOX 591933 AMC MIAMI FL 33159-1933 MIAMI FL 33172 2. Principal Place of Business - No P.O. Box # 3. Mailing Address P.O.BOX 523234 Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 06-1669498 MIAMI, FLORIDA Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33152 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo GEORGE-F: DIAZ DIAZ, GEORGE F 10811 N.W. 18TH ST. Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33026-1933 9990 NW 9ST CIRCLE UNIT 206 MIAMI, 33172 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 nstating) FILE.NOW!!! FEE IS \$150.00 9: Election Campaign Financing \$5:00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Addition P/D Change GALINDO, CARMENZA NAM! NAME CARMENZA GALINDO 10811 N.W. 18TH ST. STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33026 2920NW 25T CIRCLE UNIT 206 CITY-ST-ZIP CATY - ST- ZIP VD TITLE TITLE ☐ Delete ☐ Change Addition GALINDO, GABRIEL HAME NAME 10811 N.W. 18TH ST. STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33026 CITY-ST-ZIP CITY-ST-7IP SDTITLE ☐ Delete TITLE s/T/D Change Addition DIAZ, GEORGE F NAME NAMI GEORGE F. DIAZ 10811 N.W. 18TH ST. STREET ADDRESS STREET ADDRESS 9990 NW 9ST CIRCLE UNIT 206 PEMBROKE PINES FL 33026 CHY SI-ZIP CITY+SI-7IP MIAMI, FL. 33172 TID HILF ☐ Defete HITLE 🖵 Change Addition MOLINA, LUIS F NAME NAME LUIS F. MOLINA 10940 PINEHIGH DR. STREET ADDRESS STREET ADDRESS 10640 MORTON CHASE WAY ALPHARETTA GA 30022 CITY-ST-ZIP CITY - ST - ZIP ALPHARETTA, GEORGIA 30022 THIE ☐ Delele HILLE ☐ Change Addition NAME NAM STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-SI-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I horeby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 attachment with appaddress, with all other like empowered.

GEORGE F. DIAZ S/D

305-226-4268

**FILED**