2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 16, 2007 08:00 Al DOCUMENT # P03000130933 Secretary of State 1. Entity Name MARVIN CONSTRUTION INC. Principal Place of Business Mailing Address 22151 CORONADO SOMERSET DR. 22151 CORONADO SOMERSET DR. SORRENTO, FL 32776 US SORRENTO, FL 32776 03052007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 68-0573088 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MARVIN, LINA F DO NOT WRITE 16318 C.R. 448 MT. DORA, FL 32757 IN THIS SPACE 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees U000000669016 10. OFFICERS AND DIRECTORS DIR TITLE NAME MARVIN, GERALD P STREET ADDRESS 22151 CORONADO SOMERSET DR. SORRENTO, FL 32776 CITY-ST-ZIP VΡ TITLE MARVIN, GERALD P NAME STREET ADDRESS 22151 CORONADO SOMERSET DR. CITY-ST-ZIP SORRENTO, FL 32776 HILE NAKE STREET ADDRESS DO NOT WRITE CITY-ST-7IP THE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby cartify that the information supplied with this filling does not qualify for the exemptions obtained 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 on an attachment with an address, with all other like empowered.

SIGNATURE.

SIGNATURE ARD TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/07

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Daytime Phone *