

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 09, 2006 8:00 A.M.
Secretary of State

DOCUMENT # P04000035617

1. Entity Name

MARTINO MARKETING INC



Principal Place of Business

20565 S.W. 122 AV
106
MIAMI FL 33177
US

Mailing Address

20565 S.W. 122 AV
106
MIAMI FL 33177
US



2. Principal Place of Business

20565 SW 122 Av

Suite, Apt. #, etc.

106

City & State

MIAMI FL

Zip

33177

Country

DADE

3. Mailing Address

Suite, Apt. #, etc.

City & State

FL

Zip

Country

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

2nd MOORE

CR2E034 (5/05)

6. Name and Address of Current Registered Agent

ROBERTS, ANDREW M
20565 S.W. 122 AV
106
MIAMI FL 33177

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

FILE NOW!!! FEE IS \$550.00

DUE BY September 7, 2005

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ROBERTS, ANDREW M
20565 S.W. 122 AV #106
MIAMI FL 33177 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
400060897304
10/24/05--01058--002 **185.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
700060897377
10/24/05--01058--003 **8.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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]

ANDREW ROBERTS

10/18/05 205.251.6896

2/2

Martino Marketing Inc.
20565 SW 122 Av #106
Miami, Fl 33177

January 4, 2006


Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, Fl 32314

To Whom It May Concern:

This letter is in response to document # P04000035617 and letter # 305A00065451. I am hereby writing to inform you that I fully intended to file a business report. However due to circumstances beyond my control it was not done. This was mainly because of the interruption caused by Hurricanes Katrina and Wilma. My documents where misplaced, hence the reason I did not file a timely report.

I am hereby kindly requesting that my status be reinstated so I can continue doing business as usual. Thank you.

Yours truly,

A handwritten signature in black ink, appearing to read 'Andrew Roberts', with a long horizontal flourish extending to the right.

Andrew Roberts