

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000037101

1. Entity Name
MARVLE INC



Principal Place of Business
4015 GEM LAKE DRIVE
WEST PALM BEACH, FL 33406 US

Mailing Address
4015 GEM LAKE DRIVE
WEST PALM BEACH, FL 33406 US

FILED
Jul 23, 2008 08:00 AM
Secretary of State



07172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0846174

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PUSTELNIKOVA, EVA
4015 GEM LAKE DRIVE
WEST PALM BEACH, FL 33406

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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)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME HOLACKY, VLADIMIR
STREET ADDRESS 4015 GEM LAKE DRIVE
CITY - ST - ZIP WEST PALM BEACH, FL 33406

TITLE D
NAME HOLACKY, MARIE
STREET ADDRESS 4015 GEM LAKE DRIVE
CITY - ST - ZIP WEST PALM BEACH, FL 33406

TITLE D
NAME PUSTELNIKOVA, EVA
STREET ADDRESS 4015 GEM LAKE DRIVE
CITY - ST - ZIP WEST PALM BEACH, FL 33406

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000956105
07/23/08-80003-017 150.00

**DO NOT WRITE
IN THIS SPACE**

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-17-08