

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000041889

Entity Name: MARLON'S CAFE, INC.

FILED
Feb 06, 2006
Secretary of State

Current Principal Place of Business:

1971 SW 4TH STREET #401
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1971 SW 4TH STREET #401
MIAMI, FL 33135

New Mailing Address:

FEI Number: 86-1099728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATA, ALBERTO
1971 SW 4TH STREET #401
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MATA, ALBERTO
Address: 1971 SW 4TH STREET #401
City-St-Zip: MIAMI, FL 33135

Title: S () Delete
Name: MATA, DARLING
Address: 1971 SW 4TH STREET #401
City-St-Zip: MIAMI, FL 33135

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: REYES, JAIRO
Address: 9102 NW 112 ST
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: T () Change (X) Addition
Name: REYES, MAYRA
Address: 9102 NW 112 ST
City-St-Zip: HIALEAH GARDENS, FL 33018

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERTO MATA

PD

02/06/2006

Electronic Signature of Signing Officer or Director

_____ Date