2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065968

AVENTURA, FL 33180

City-St-Zip:

Entity Name: MARINA RESORT RENTALS, INC.

FILED Apr 18, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
18851 NE 29TH AVENUE				18100 NORTH BAY ROAD			
SUITE 900 AVENTURA, FL 33180				LOBBY SUNNY ISLES, FL 33160			
Current Mailing Address:				New Mailing Address:			
18851 NE 29TH AVENUE SUITE 900 AVENTURA, FL 33180				18100 NORTH BAY ROAD FRONT DESK SUNNY ISLES, FL 33160			
FEI Number:		FEI Number Applied For ()	FEI Nun	nber Not Appl	icable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
ROUSSO, MARK E 18851 NE 29TH AVENUE SUITE 1900				HERNAN, VERGARA 18851 NE 29TH AVENUE SUITE 900 AVENTURA, FL 33180 US			
AVENTUR	A, FL 33180 U	8		AVENTUR	A, FL 3318	u us	
The above in the State		ubmits this statement for the p	ourpose o	f changing it	ts registered	d office or registered agent, or both,	
SIGNATURE: HERNAN VERGARA				04/18/2005			
	Electroni	Signature of Registered Age	ent			Date	
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () I VERGARA, HERI 18851 NE 29TH I AVENTURA, FL	AVENUE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () I MURILLO, JUAN 18851 NE 29TH I AVENTURA, FL	AVENUE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () I SAAL, JOSE NO 18851 NE 29TH AVENTURA, FL	AVENUE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	TD () I ROMANIO, PAUL 18851 NE 29TH			Title: Name: Address:	TD ROMANO, P	(X) Change()Addition AUL 9TH AVENUE	

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

City-St-Zip: AVENTURA, FL 33180

SIGNATURE: HERNAN VERGARA PD 04/18/2005