

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146414

FILED
Apr 27, 2007
Secretary of State

Entity Name: MARLIN CASH & CARY, INC.

Current Principal Place of Business:

6249 SW 131 PL
103
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

6249 SW 131 PL
103
MIAMI, FL 33183

New Mailing Address:

FEI Number: 20-1785132 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LATIF, MOHAMMAD T
6249 SW 131 PL
103
MIAMI, FL 33183 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: LATIF, MOHAMMAD T
Address: 6249 SW 131 PL
City-St-Zip: MIAMI, FL 33183

Title: VP () Delete
Name: FAROOQ, FRASAT CPA
Address: 6602 SW 61 TERR
City-St-Zip: SOUTH MIAMI, FL 33143

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LATIF, MOHAMMAD T
Address: 6249 SW 131 PL #103
City-St-Zip: MIAMI, FL 33183

Title: VP (X) Change () Addition
Name: LATIF, FARZANA
Address: 6249 SW 131 PL #103
City-St-Zip: MIAMI, FL 33183

Title: D () Change (X) Addition
Name: LATIF, ATIF
Address: 6249 SW 131 PL #103
City-St-Zip: MIAMI, FL 33183

Title: D () Change (X) Addition
Name: LATIF, SAQIB
Address: 6249 SW 131 PL #103
City-St-Zip: MIAMI, FL 33183

Title: D () Change (X) Addition
Name: LATIF, KAUSAR
Address: 6249 SW 131 PL #103
City-St-Zip: MIAMI, FL 33183

Title: D () Change (X) Addition
Name: LATIF, MEMUNA
Address: 6249 SW 131 PL #103
City-St-Zip: MIAMI, FL 33183

I hereby certify that the information supplied with this filing does not qualify 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: LATIF MOHAMMAD T

P

04/27/2007

Electronic Signature of Signing Officer or Director

_____ Date