## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000050905

Entity Name: MARVAGI INVESTOR & MANAGEMENT, INC.

FILED Feb 27, 2006 Secretary of State

Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:		
	「ATION DRIVE EACH, FL 334					
Current Ma	ailing Address	<b>::</b>	New Maili	New Mailing Address:		
	「ATION DRIVE EACH, FL 334					
FEI Number:	20-2632628	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
LOOR, MARCIA 3089 NW 27TH TERRA BOCA RATON, FL 33434 US			LOOR, MARCIA 3089 NW 27TH TERRACE BOCA RATON, FL 33434 US			
The above in the State		ubmits this statement for the p	urpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATUR	RE: MARCIA L	OOR		02/27/2006		
Electronic Signature of Registered Agent			nt	Date		
Election Cam	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-Ct-Zip:	LOOR, MARCIA 3089 NW 27TH T BOCA RATON, F  VP () I DITTO, VANESS, 3089 NW 27TH T BOCA RATON, F  S () I DITTO, VANESS, 3089 NW 27TH T	L 33434 US  Delete A  FERRA L 33434 US  Delete A  FERRA	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	LOOR, MARCI, 3089 NW 27TH BOCA RATON, (	TERRACE	
City-St-Zip: Title: Name:	BOCA RATON, F  T ()  LOOR, MARCIA	Delete	City-St-Zip: Title: Name:	T (X LOOR, MARCI		

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.

City-St-Zip:

SIGNATURE: MARCIA LOOR P 02/27/2006

BOCA RATON, FL 33434 US

City-St-Zip:

BOCA RATON, FL 33434 US