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Suite, Act 4, etc.       Suite, Apt 4, etc.       02242008       Chy P       CR2E034 (11/05)         City 4 State       Cry 5 State       -       FB1, Number 3, 20 (16/04)       Applied For.         Zity       Country       20       Country       8. Centicate of Status Desired       \$8,75 Additions         Zity       Country       20       Country       8. Centicate of Status Desired       \$8,75 Additions         Status       -       The mand Address of Current Registered Agent       -       Name       -         ORNELLUS; DAVID <sup></sup> -       Status Address (PD - Box Number is Not Acceptable)       -       -         DSD SE FEDERAL HIGHWAY       -       Status Address (PD - Box Number is Not Acceptable)       -       -         The above named entity submits this statement for the purpose of changing is registered agent, or box, in the State of Poids. Tem femiliar with, and accept the deglaces agent.       -       -       -         CMURLE       - <th>050 SE FE</th> <th>DERAL HIGH</th> <th></th> <th>50</th> <th>50 SE FEDERAL H</th> <th>IIGHWAY</th> <th></th> <th></th> <th>v</th> <th></th> <th></th> <th></th>	050 SE FE	DERAL HIGH		50	50 SE FEDERAL H	IIGHWAY			v			
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4. Name and Address of Key Registered Agent     7. Name and Address of Key Registered Agent       ORNELUS; DAVID     ORNELUS; DAVID       OSS 05 EFEDERAL HIGHWAY     Streat Address (PC. Box Number is Not Acceptable)       The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Portda. I an familiar with, and accept the obligations of registered agent.       CMTURE     File NOWITH FEE IS \$150.00       CMTURE     P. Election Campaign Francing       Tas Fund Controlution     Address for Operations of Operations of Defections in the State of Portda. I an familiar with, and accept the Obligations of registered agent.       GMTURE     P. Election Campaign Francing     \$5.00 May Be       Tas Fund Controlution     Address for Operations of Operations and Controlution     Address       MATOS, MARCK     Defen     This       MATOS, MARCK     Defen     This       MATOS, MARCK     Defen     This       STUART, FL 34997     Imit     Mode to Free       MATOS, MARCK     Defen     This       STREI Address     Imit     Mode to Free       MATOS, MARCK     Defen     This       STREI Address     Imit     Mode       STREI Address     Imit     Mode       STREI Address     Imit     Mode       STREI Address     Imit     Mode <tr< td=""><td>Zip</td><td></td><td>Country</td><td>Zi</td><td>p .</td><td>Coun</td><td>utry</td><td></td><td></td><td></td><td>8.75 Ad</td><td>ditional</td></tr<>	Zip		Country	Zi	p .	Coun	utry				8.75 Ad	ditional
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ME     International and 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 the 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.	FIL After M D. THE ME REET ADDRESS TY-ST-ZIP THE ME REET ADDRESS	P MATOS, 1 5050 SE 1	FEE IS \$150.00 6 Fee will be \$55 OFFICERS A MARCK FEDERAL HIGHWAY	IO.GO	9. Election Cam Trust Fund Co ORS	Daign Finan Intribution. 11. TITLE NAME STREE CITY- TITLE NAME STREE	Acting Ac	5.00 May Be Ided to Fees	CHANGES TO OFFI	CERS AND E	Change	Addition
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ME     NAME       RET ADDRESS     STRET ADDRESS       IV-S1-ZP     CITY-S1-ZP       I. 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.	FIL After M o. TILE THET ADDRESS TY-ST-ZP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP	P MATOS, 1 5050 SE 1	FEE IS \$150.00 6 Fee will be \$55 OFFICERS A MARCK FEDERAL HIGHWAY	IO.GO	9. Election Carn Trust Fund Co ORS Delete	11. 11. 11. 11. 11. 11. 11. 11. 11. 11.	Acing According	5.00 May Be Ided to Fees	CHANGES TO OFFI	CERS AND E	Change	Addition
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280-03,50



ATTACHMENT

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 7, 2006

MARTIN COVE INC. 5050 SE FEDERAL HIGHWAY STUART, FL 34997

Subject: MARTIN COYE INC. Reference Number: P05000113851

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cd ANNUAL REPORTS SECTION