2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144042

City-St-Zip:

MIAMI, FL 33138

Entity Name: MARKETING AND SEASON CORPORATION

FILED May 15, 2008 Secretary of State

| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
|---|--|----------------------------------|---|--|--------------------------------------|--|
| | AYNE BLVD | | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 7300 BISC 305 MIAMI, FL | AYNE BLVD 33138 | | | | | |
| FEI Number: | : 05-0628603 | FEI Number Applied For () | FEI Number Not Appl | icable () | Certificate of Status Desired () | |
| Name and | Address of C | Current Registered Agent: | Name and | Name and Address of New Registered Agent: | | |
| LATORRE 305 GALEI # 107 KEY BISC/ | | 49 US | | | | |
| | named entity e of Florida. | submits this statement for the p | urpose of changing i | ts registered o | office or registered agent, or both, | |
| SIGNATUR | RE: | | | | | |
| | Electron | nic Signature of Registered Age | nt | | Date | |
| Election Car | npaign Financin | g Trust Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | PT (LATORRE, JOS 305 GALEN DE KEY BISCAYN | R - # 107 | Title: Name: Address: City-St-Zip: | LATORRE, JOS | ORE DR SUIT 2335 | |
| Title: Name: Address: City-St-Zip: | S (ESCOBAR, IRI 305 GALEN DF KEY BISCAYN | R - # 107 | Title: Name: Address: City-St-Zip: | () |) Change()Addition | |
| Title: Name: Address: City-St-Zip: | V (LARA, BELKYS 7300 BISCAYN MIAMI, FL 331 | IE BLVD #305 | Title: Name: Address: City-St-Zip: | () |) Change ()Addition | |
| Title: Name: Address: | V (FAVIER, DARV 7300 BISCAYN | | Title: Name: Address: | () |) Change()Addition | |

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.

City-St-Zip:

SIGNATURE: JOSE LATORRE PT 05/15/2008