2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000160364

Address:

City-St-Zip:

830 EMERALD WAY

ROCKLEDGE, FL 32955 US

Entity Name: MARCELLE CARES, INC.

FILED Sep 03, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	DDYCREST A	VENUE	1070 OGDEN AVE		
2C BRONX, N	NY 10452	US	5C BRONX, NY 10452	US	
Current M	lailing Addre	ess:	New Mailing Addres	New Mailing Address:	
	DDYCREST A	VENUE	1070 OGDEN AVE		
2C BRONX, N	IY 10452	US	5C BRONX, NY 10452	US	
FEI Number	: 20-3912492	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
EUSTIS, F	named entity	JS	purpose of changing its registere	ed office or registered agent, or both,	
	e of Florida.				
SIGNATURE: Electronic Signature of Registered Agent			uent	 Date	
	ce with s. 607.1	93(2)(b), F.S., the corporation did n			
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	MARCELLE-N 830 EMERAL) Delete ICKOY, DEBORAH E D WAY , FL 32955 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	MCKOY, DEI	CREST AVENUE, #2C	Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip:					
City-St-Zip: Title: Name: Address: City-St-Zip:	MCKOY, DEI	CREST AVENUE, APARTMENT 2C	Title: Name: Address: City-St-Zip:	() 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.

Address:

City-St-Zip:

SIGNATURE: DEBORAH E. MARCELLE-MCKOY CEO 09/03/2007