2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000087511

1. Entity Name

MARA SPECIALTY SERVICE INC.



Principal Place of Business

819 PEACOCK PLAZA - STE 665 KWY WEST, FL 33040 Mailing Address

819 PEACOCK PLAZA - STE 665 KWY WEST, FL 33040

FILED Apr 09, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

04012008 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0780214

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.				
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent argenture required when reinstating)			DATE	
FILE NOW!!! FEE 1S \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 1. Trust Fund Contribution. 1. Added to Fees				
10. OFFICERS AND DIRE	CTORS			
TITLE PSTD NAME FRANCZUK, MAREK STREET ADDRESS 819 PEACOCK PLAZA - STE 665 CITY-ST-ZIP KWY WEST, FL 33040				U00000887964 04/21/08-80041-011 150.00
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ITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this i	the dense a with to the	montions services	ained in Chapter 145	Claring Clath do I for their position than the information

12. 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 cath; 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-03-2008 305-3045130

Daytime Phon