2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000010274

Entity Name: MARSIL INVESTMENTS INC.

FILED Apr 21, 2008 Secretary of State

-mary mamor	IVII (I COIL II	WESTWEITTS IITS.				
Current Princi	of Business:	New Prince	New Principal Place of Business:			
201 N JEFFER: CORAL GABLE		133				
Current Mailin	g Addres	s:	New Mail	ing Address	:	
201 N JEFFER: CORAL GABLE		133				
FEI Number: 51-0622509 FEI Number Applied For () FEI Nu			FEI Number Not App	umber Not Applicable () Certificate of Status Desired ()		
Name and Add	iress of C	urrent Registered Agent	: Name and	d Address of	New Registered Agent:	
SILVA, JAMES 201 N JEFFER: CORAL GABLE		133 US				
The above nam in the State of F		submits this statement for t	he purpose of changing	its registered	office or registered agent, or both,	
SIGNATURE:						
-	Electron	ic Signature of Registered	Agent		Date	
Election Campaig	n Financing	Trust Fund Contribution ().				
OFFICERS AN	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SILVA, JAME 201 N JEFFE	() Change (X) Addition SS D PRESIDE ERSON DR LES, FL 33133	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SILVA, JACC 201 N JEFFE	() Change (X) Addition DUEOLYN B VICE PR ERSON DR LES, FL 33133	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SILVA, JAME 201 N JEFFE		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SILVA, JACC 201 N JEFFE	() Change (X) Addition DUEOLYN B SECETAR ERSON DR LES. FL 33133	

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.

SIGNATURE: JAMES SILVA MR 04/21/2008