

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000095286

Entity Name: MARBER INSURANCE, INC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

8005 SW 150 AVENUE
MIAMI, FL 33193

New Principal Place of Business:

1008 E. SILVER SPRINGS BLVD.
SUITE A
OCALA, FL 34470

Current Mailing Address:

8005 SW 150 AVENUE
MIAMI, FL 33193

New Mailing Address:

1008 E. SILVER SPRINGS BLVD
SUITE A
OCALA, FL 34470

FEI Number: 26-3594645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PANA, GERMAN
9010 SW 137 AVENUE
SUITE 113
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

GOMEZ, BERNARDO
1008 E. SILVER SPRINGS BLVD
SUITE A
OCALA, FL 34470 US

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.

SIGNATURE: BERNARDO GOMEZ

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOMEZ, MARCO A
Address: 8005 SW 150 AVENUE
City-St-Zip: MIAMI, FL 33193

Title: VP () Delete
Name: GOMEZ, BERNARDO
Address: 8005 SW 150 AVENUE
City-St-Zip: MIAMI, FL 33193

Title: S () Delete
Name: GOMEZ, LILIA
Address: 8005 SW 150 AVENUE
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BERNARDO GOMEZ

VP

04/28/2009

Electronic Signature of Signing Officer or Director

Date