

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000087227

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** MARNADE SERVICES CORP

**Current Principal Place of Business:**

9499 COLLINS AVENUE  
SUITE 908  
SURFSIDE, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

9499 COLLINS AVENUE  
SUITE 908  
SURFSIDE, FL 33154

**New Mailing Address:**

**FEI Number:** 27-3765276

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

IOFFE, EZEQUIEL  
9499 COLLINS AVENUE  
SUITE 908  
SURFSIDE, FL 33154 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: IOFFE, EZEQUIEL  
Address: 9499 COLLINS AVENUE #908  
City-St-Zip: SURFSIDE, FL 33154

I hereby 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 all other like empowered.

SIGNATURE: EZEQUIEL IOFFE

PD

03/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date