2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P37377

Entity Name: MARATHON TRAVEL, INC.

FILED Dec 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

602 E VINE ST 200 E 170 TH ST KISSIMMEE, FL 34744 BRONX, NY 10456

Current Mailing Address: New Mailing Address:

602 E VINE ST 200 E 170TH ST KISSIMMEE, FL 34744 BRONX, NY 10456

FEI Number: 22-2170876 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GOMEZ, ALFREDO
604 E. VINE ST.
KISSIMMEE, FL 34744 US
BAEZ, ISABEL
1562 AMORADA BLVD
KISSIMMEE, FL 34744 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: ISABEL BAEZ

ISABEL BAEZ 12/04/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP () Delete Title: DCP (X) Change () Addition

 Name:
 GOMEZ, ALFREDO,
 Name:
 BAEZ, ISABEL

 Address:
 602 E. VINE ST
 Address:
 1562 AMORADA BLVD

 City-St-Zip:
 KISSIMMEE, FL 34744
 City-St-Zip:
 KISSIMMEE, FL 34744

Title: DPC (X) Delete Title: () Change () Addition

 Name:
 GOMEZ, ALFREDO
 Name:

 Address:
 604 E. VINE ST
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34744
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 BAEL, ISABEL
 Name:

 Address:
 602 E. VINE ST.
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34744
 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: ISABEL BAEZ DCP 12/04/2007