

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000067809

Entity Name: MARIAH, INC.

FILED
Jan 16, 2007
Secretary of State

Current Principal Place of Business:

922 LOTUS VISTA DR.
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

922 LOTUS VISTA DR.
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

922 LOTUS VISTA DR.
UNIT 101
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

922 LOTUS VISTA DR.
UNIT 101
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3334585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWE, ALAN
3544 COUNTRY LAKES DR
ORLANDO, FL 32812 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: BELISLE, MARK
Address: 3600 POMPANO CT
City-St-Zip: GOTH, FL 34734 US

Title: P () Delete
Name: ROWE, ALAN
Address: 3544 COUNTRY LAKES DR
City-St-Zip: ORLANDO, FL 32812

Title: T () Delete
Name: JONES, JOEL D
Address: 104 SECLUDED OAKS CRT
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: JONES, JOEL D
Address: 922 LOTUS VISTA DR, UNIT 101
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information supplied with this filing does not qualify for the 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: JOEL D. JONES

TREA

01/16/2007

Electronic Signature of Signing Officer or Director

Date