


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 14, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P95000089997</b> 1. Entity Name <b>MARLA ENTERPRISES, INC.</b>	
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Principal Place of Business <b>941 KINGS CROWN DRIVE SANIBEL ISLAND, FL 33957</b>	Mailing Address <b>941 KINGS CROWN DRIVE SANIBEL ISLAND, FL 33957</b>
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01312004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0627841</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**MARCIANO, MATTHEW R  
941 KINGS CROWN DRIVE  
SANIBEL ISLAND, FL 33957**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.


SIGNATURE \_\_\_\_\_ (Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>U00000112453</b> <b>04/14/04-80023-022 150.00</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	STD MARCIANO, MATTHEW R 941 KINGS CROWN DRIVE SANIBEL ISLAND, FL 33957
TITLE NAME STREET ADDRESS CITY ST ZIP	PVD LAURION, NANETTE 941 KINGS CROWN DRIVE SANIBEL ISLAND, FL 33957
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **MATTHEW R. MARCIANO**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **4/14/04** 238 472-0941  
Daytime Phone #