Apr 28, 2006 8:00 am Secretary of State 2006 FOR PROFIT CORPORATION **ANNUAL REPORT** 04-28-2006 90165 026 ***150.00 DOCUMENT # P97000019898 MARTNI LBV. INC. 40069001 Principal Place of Business Mailing Address 5728 MAJOR BLVD **5728 MAJOR BLVD** SUITE 601 SUITE 601 ORLANDO, FL 32819 ORLANDO, FL 32819 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03032006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 59-3432822 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KHATIB, RASHID S A 5728 MAJOR BLVD., STE 601 Street Address (P.O. Box Number is Not Acceptable) ORLANDO, FL 32819 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DPST Delete TITLE ☐ Addition KHATIB. RASHID A NAME NAME 5728 MAJOR BLVD., STE 601 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Detete TITLE NAME KHOURI, ZAHI W 5728 MAJOR BLVD., STE 601 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32819 CITY-ST-ZIP **VP** ☐ Change X Addition TITLE Delete HOdge, Randall R 5728 Major Blyd, Orlando, FL 32819 NAME NAME STREET ADDRESS STREET ADDRESS Ste 601 CITY-ST-7IP CHY-ST-ZIP ☐ Delete HILE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 1/71 F ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ng &

Rashidkhatib

4-27-06

407-354-2206

FILED