

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2004 8:00 am
Secretary of State

04-08-2004 90045 013 ***150.00

DOCUMENT # P97000039509

1. Entity Name

MARIELA GRAPHICS, INC.



Principal Place of Business

9815 W. SAMPLE RD.
CORAL SPRINGS FL 33065
US

Mailing Address

9815 W. SAMPLE RD
1818 SOUTH AUSTRALIAN AVENUE
CORAL SPRINGS FL 33065
US

34060100

2. Principal Place of Business

3. Mailing Address

9815 W. Sample Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

MOORE

CR2E034 (11/03)

City & State

City & State
Coral Springs FL

4. FEI Number

65-0753538

Applied For

Not Applicable

Zip

Country

Zip

Country

133065 USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WERNICK, HOWARD
9815 W. SAMPLE RD.
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name
Wernick Penny
Street Address (P.O. Box Number is Not Acceptable)
9815 W. Sample Rd.
City
Coral Springs FL 33065

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 Penny Wernick

Penny Wernick

4/1/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WERNICK, HOWARD
9815 W. SAMPLE RD.
CORAL SPRINGS FL 33065 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President Penny Wernick ☒ Change ☐ Addition
9815 W. Sample Rd
Coral Springs FL 33065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Penny Wernick

Date

Daytime Phone #

9815 W. Sample Rd
Coral Springs FL 33065
4/1/04
0031