



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90024 033 ***150.00

DOCUMENT # P97000074703 1. Entity Name MARKER 88 MORTGAGE, INC.																																																																																																											
Principal Place of Business 2200 NW CORPORATE BLVD SUITE 401 BOCA RATON, FL 33431			Mailing Address 2200 NW CORPORATE BLVD SUITE 401 BOCA RATON, FL 33431																																																																																																								
2. Principal Place of Business - No P.O. Box # 7301-A W. PALMETTO PK. RD. Suite, Apt. #, etc. SUITE 305C		3. Mailing Address 7301-A W. PALMETTO PK. RD. Suite, Apt. #, etc. SUITE 305C																																																																																																									
City & State BOCA RATON, FL		City & State BOCA RATON, FL		4. FEI Number 65-0779044																																																																																																							
Zip 33433		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																							
6. Name and Address of Current Registered Agent SCHILIAN, GERALD 2200 NW CORPORATE BLVD SUITE 401 BOCA RATON, FL 33431				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 7301-A WEST PALMETTO PARK RD, SUITE 305C City BOCA RATON FL Zip Code 33433																																																																																																							
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 <u><i>[Signature]</i></u> GERALD SCHILIAN 1/28/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing.) DATE</small>																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="5">BRADY, S</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="5">2200 NW CORPORTATE BLVD., #401 BOCA RATON, FL 33431</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="5">VP</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="5">WATARZ, D A</td> </tr> <tr> <td></td> <td colspan="5">2200 NW CORPORATE BLVD., #401 BOCA RATON, FL 33431</td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="5"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="5"></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="5"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="5"></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td>NAME</td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="5"></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="5"></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	BRADY, S					CITY-ST-ZIP	2200 NW CORPORTATE BLVD., #401 BOCA RATON, FL 33431					TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	VP					CITY-ST-ZIP	WATARZ, D A						2200 NW CORPORATE BLVD., #401 BOCA RATON, FL 33431					TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS						CITY-ST-ZIP						TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS						CITY-ST-ZIP						TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS						CITY-ST-ZIP					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																																																								
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																						
STREET ADDRESS	BRADY, S																																																																																																										
CITY-ST-ZIP	2200 NW CORPORTATE BLVD., #401 BOCA RATON, FL 33431																																																																																																										
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																						
STREET ADDRESS	VP																																																																																																										
CITY-ST-ZIP	WATARZ, D A																																																																																																										
	2200 NW CORPORATE BLVD., #401 BOCA RATON, FL 33431																																																																																																										
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																						
STREET ADDRESS																																																																																																											
CITY-ST-ZIP																																																																																																											
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																						
STREET ADDRESS																																																																																																											
CITY-ST-ZIP																																																																																																											
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																						
STREET ADDRESS																																																																																																											
CITY-ST-ZIP																																																																																																											
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.																																																																																																											
SIGNATURE: <u><i>[Signature]</i></u> DEBORAH A. WATARZ 1/28/08 561-994-8830 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VICE PRESIDENT Date Daytime Phone #</small>																																																																																																											