2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000069655

1. Entity Name

MARGAL ENTERPRISES, INC.



FILED Mar 17, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

17525 E. APSHAWA ROAD CLERMONT, FL 34711 17525 E. APSHAWA ROAD CLERMONT, FL 34711



DO NOT WRITE IN THIS SPACE

03142008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3497137

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CLEM, ALAN L 17525 E. APSHAWA ROAD CLERMONT, FL 34711

DO NOT WRITE 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 tale if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Fig. Trust Fund Contribution		\$5.00 May 8a Added to Fees	
10.	OFFICERS AND DIREC	TORS			*
TITLE	PD				04/03/08-80008-007 150.00
NAME STREET ADDRESS CITY-ST-ZIP	CLEM, ALAN L 17525 E. APSHAWA ROAD CLERMONT, FL 34711			·	
₹ΠŁE	D				
NAME	WITZENBURGER, PETER		J		
STREET ADDRESS	34939 CUTTOFF RD.				
CITY-ST-ZIP	FRUITLAND PARK, FL 34731				
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NAME					
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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 adjurant 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 received or trustee empowered to effect 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 any address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-08

407-657-1826

Daytime Phone i