

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

04 MAY 10 AM 9:19

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P98000087368

1. Entity Name
MARGE ENTERPRISES, INC.



Principal Place of Business
**3275 WEST HILLSBORO BLVD.
SUITE 110
DEERFIELD BEACH, FL 33442-9410 US**

Mailing Address
**3275 WEST HILLSBORO BLVD.
SUITE 110
DEERFIELD BEACH, FL 33442-9410 US**

\$150.00



04302004 No Chg-P CR2E034 (10/03) *04*

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4. FEI Number
65-0868276

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**COLEMAN, ANTHONY G JR.
3275 W. HILLSBORO BLVD.
STE 207
DEERFIELD BEACH, FL 33442**

**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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	EISENBERG, MARGARET W
STREET ADDRESS	3275 WEST HILLSBORO BLVD., STE. 110
CITY-ST-ZIP	DEERFIELD BEACH, FL 334429410
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**DO NOT WRITE
IN THIS SPACE**

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: *Margaret Eisenberg*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/04
Date

Daytime Phone #