


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

1094

DOCUMENT # P98000105600 1. Entity Name MARLIN CONSTRUCTION AND ENGINEERING OF SOUTH FLORIDA, INC.			FILED 04 APR 29 PH 6: 23 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 2535 SUCCESS DRIVE ODESSA, FL 33556		Mailing Address 2535 SUCCESS DRIVE ODESSA, FL 33556	
DO NOT WRITE IN THIS SPACE			
		05032004 No Chg-P CR2E034 (10/03) 04	
		4. FEI Number 59-3548606	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
BAKER, RICHARD W 2535 SUCCESS DRIVE ODESSA, FL 33556		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD BAKER, RICHARD W 2535 SUCCESS DRIVE ODESSA, FL 33556		
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			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
200035550992 05/06/04--01009--005 **150.00			
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: <u>See attached</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
<small>Date Daytime Phone #</small>			

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Business Entity Name

MARLIN CONSTRUCTION AND ENGINEERING OF SOUTH FLORIDA, INC.

FEI Number

593548606

FEI Number Status

☐

Applied For

☐

Not Applicable

☒

Current

Certificate of Status Desired

☐

Yes

☒

No

\$8.75 each

Principal Place of Business

Address

2535 SUCCESS DRIVE

Suite, Apt. #, etc.

City, State

ODESSA

FL

Zip Code & Country 33556

Mailing Address

Address

2535 SUCCESS DRIVE

Suite, Apt. #, etc.

City, State

ODESSA

FL

Zip Code & Country 33556

Name And Address of Registered Agent

Name (Last, First, Middle, Title)

BAKER

, RICHARD

, W

-or- RA Business Name

Address

2535 SUCCESS DRIVE

Suite, Apt. #, etc.

City, State

ODESSA

, FL

Zip Code & Country

33556

US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

Continue

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Business Entity Name

MARLIN CONSTRUCTION AND ENGINEERING OF SOUTH FLORIDA, INC.Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Officer/Director Name And Address

Title	PSTD		
Name (Last, First, Middle, Title)	BAKER	RICHARD	W
-or- Entity Name			
Street Address	2535 SUCCESS DRIVE		
City, State	ODESSA, FL		
Zip Code & Country	33556		

Title			
Name (Last, First, Middle, Title)			
-or- Entity Name			
Street Address			
City, State			
Zip Code & Country			

Title			
Name (Last, First, Middle, Title)			
-or- Entity Name			
Street Address			
City, State			
Zip Code & Country			

Title			
Name (Last, First, Middle, Title)			
-or- Entity Name			
Street Address			
City, State			
Zip Code & Country			

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Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

☐ List more than six Officers/Directors ☒ No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title
Officer/Director Signature

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