2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000016043

1. Entity Name



FILED Apr 14, 2008 8:00 am Secretary of State

04-14-2008 90025 050 ***150.00

MARTNI HOLDINGS V, INC.											
Principal Place 5728 MAJOR SUITE 601 ORLANDO, FI	BLVD	Mailing Address 5728 MAJOR BLVD SUITE 601 ORLANDO, FL 32819			1 1861 18	B ichib (bir əchi) cəhi cə		I 63 111 61836 11	1881 H 1881		
2. Principal P	W. Sand Take Rd.	7932 W. Sand lake Rd.									
Subtle Sold		Suite 300 ^{#, etc.}				03112008	Chg-P	CR2E03	4 (12/06)		
	do, FL	Ofiando, FL				4. FEI Number Applied For 59-3558237 Not Applicable					
^{Zi} 828 19	Country	32819	Coun	try		5. Certificate	of Status Desired		8.75 Add ee Require		
	6. Name and Address of Current	Registered Agent				7. Name and	Address of New F	Registered A	gent		
KHATIB, RASHID A 5728 MAJOR BLVD					Name Street Address (P.O. Box Number is Not Acceptable)						
SUITE 601 ORLANDO, FL 32819											
					7932 W. Sand Lake Rd. Ste 300 Orlando, FL 32819 FL Zip				Zip Cod	ə	
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 Rorida. 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 NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees								İ			
10.	D. OFFICERS AND DIRECTORS 11.					ADDITIONS	CHANGES TO OFF	FICERS AND	DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PSTD KHATIB, RASHID A 5728 MAJOR BLVD, SUITE 601 ORLANDO, FL 32819	☐ Delete			7932 Orlai	2 W. Sand L ndo, FL 328	.ake Rd. Ste 3	900	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HODGE, RANDALL R 5728 MAJOR BLVD, SUITE 601 ORLANDO, FL 32819	☐ Delete				2 W. Sand ando, FL 32	Lake Rd. Ste 3 819		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	•				•		Change	☐ Addilion	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	:	☐ Delete		1					Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1					Change	Addition	

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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/2

101-32 4- 53~ Date

Daytime Phone #