

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000028955

Entity Name: MARJIRA ASSOCIATES, INC.

FILED  
Apr 20, 2005  
Secretary of State

## Current Principal Place of Business:

3828 SW 70TH AVENUE  
MIRAMAR, FL 33023

## New Principal Place of Business:

## Current Mailing Address:

3828 SW 70TH AVENUE  
MIRAMAR, FL 33023

## New Mailing Address:

FEI Number: 65-0907130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARINAH, ADRIENNE  
3828 SW 70TH AVENUE  
MIRAMAR, FL 33023 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: ARINAH, ADRIENNE  
Address: 3828 SW 70TH AVENUE  
City-St-Zip: MIRAMAR, FL 33023

Title: SD ( ) Delete  
Name: PIERRE, PATRICK L  
Address: 1441 NW 20TH STREET  
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete  
Name: ARINAH, RONALD  
Address: 12950 NW 18TH COURT  
City-St-Zip: MIAMI, FL 33168

Title: D ( ) Delete  
Name: DINGLE, ROSALIND  
Address: 1943 NW 72ND STREET  
City-St-Zip: MIAMI, FL 33147

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: THOMAS, SONDR  
Address: 5620 NW 59TH STREET UNIT 7  
City-St-Zip: TAMARAC, FL 33319

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADRIENNE ARINAH

PTD

04/20/2005

Electronic Signature of Signing Officer or Director

Date