2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 19, 2007 08:00 A Secretary of State **DOCUMENT # P99000038571** 1. Entity Name MARATHON AUTOMOTIVE, INC. Principal Place of Business Mailing Address **609 CYPRESS STREET** 609 CYPRESS STREET TARPON SPRINGS, FL 34689 TARPON SPRINGS, FL 34689 DO NOT WRITE IN THIS SPACE CR2E034 (11/05) 03162007 No Cha-P 4. FEI Number Applied For 59-3573144 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent VENIZELOS, ANASTASIOS DO NOT WRITE 609 CYPRESS STREET TARPON SPRINGS, FL 34689 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when remetating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS VENIZELOS, ANASTASIOS NAME STREET ADORESS **609 CYPRESS STREET** CITY-ST-ZIP TARPON SPRINGS, FL 34689 \$<u>3</u>8173000001 NAME STREET ADDRESS ``03/28/07~80046~001 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7P TITLE

12. I hereby certify that the information supplied with this filling 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 attachnegt with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS C/TY-ST-ZIP

IG OFFICER OR DIRECTOR