2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55872

City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ODESSA, FL 33556

GODDARD, ANDREW S.,

BOCA RATON, FL 33437

2855 NW 42 STREET

DIETZ, WILLIAM W

8902 JASPERS DR

() Delete

() Delete

BOYNTON BEACH, FL 33437

FILED Jan 19, 2004 Secretary of State

					,	
Entity Name: MARLO INTERNATIONAL, INCORPORATED						
Current Pr	ce of Business:	New Princ	New Principal Place of Business:			
4007 N.E. 6	TH AVE.					
OAKLAND	PARK, FL 3	33334				
O 184	.:I: A .l .l		Na 84-11:			
Current Mailing Address:				New Mailing Address:		
4007 N.E. 6	TH AVE. PARK, FL 3	2221				
OARLAND	FARK, FL 3	33334				
FEI Number:	65-0275784	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Na				Name and Address of New Registered Agent:		
GODDARD 4007 N.E. 6 OAKLAND		33334 US				
The above in the State		y submits this statement for the purp	oose of changing i	ts registere	d office or registered agent, or both,	
SIGNATUR	E:					
	Electro	onic Signature of Registered Agent			Date	
Election Cam	paign Financi	ing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:	DP (() Delete	Title:	DP	(X) Change () Addition	
Name:	GODDARD, N		Name: Address:	GODDARD,		
Address: City-St-Zip:	2412 NW 351 BOCA RATOR		Address: City-St-Zip:	2412 NW 35 BOCA RATO	DN, FL 33431	
Title:	D (() Delete	Title:	D	(X) Change () Addition	
Name:	DIETZ, WALL		Name:	DIETZ, WAL		
Address: City-St-Zip:	18315 CYPR TAMPA, FL 3	ESS VIEW WAY 32647	Address: City-St-Zip:	18315 CYPRESS VIEW WAY TAMPA, FL 32647		
Title:	D (() Delete	Title:	D	(X) Change () Addition	
Name:	DIETZ, RAND		Name:	DIETZ, RAN		
Address:	16133 CARD	ILN DI	Address:	16133 CARI	JEN DI	

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.

City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ODESSA, FL 33556

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BOYNTON BEACH, FL 33437

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DIETZ, WILLIAM W

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(X) Change () Addition

(X) Change () Addition

SIGNATURE: MARK S. GODDARD DP 01/19/2004