


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 29, 2008 08:00 AM
Secretary of State

DOCUMENT # V30772 1. Entity Name MARYED INTERNATIONAL, INC.	
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Principal Place of Business 1501 SE DECKER AVE UNIT 104 A STUART, FL 34994-3964 US	Mailing Address 1501 SE DECKER AVE UNIT 104 A STUART, FL 34994-3964 US
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DO NOT WRITE IN THIS SPACE



02252008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0327616	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

BALTES, MARY
 3624 SW SUNSET TRACE CIRCLE
 PALM CITY, FL 34990

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVSD BALTES, MARY L 3624 SW SUNSET TRACE CIRCLE PALM CITY, FL 34990
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03/11/08-80070-015 150.00

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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: Mary L. Baltes Date: 2/24/08 (772) 781-4449
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #