

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000011113

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC0957586220**

**Entity Name:** MARLON MCKENZIE AUTO TECH, INC.

**Current Principal Place of Business:**

10650 S.W. 186 LN  
MIAMI, FL 33157

**Current Mailing Address:**

10650 S.W. 186TH LANE.  
MIAMI, FL 33157

**FEI Number:** 20-2200066

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MCKENZIE, MARLON  
10650 S.W. 186TH LANE.  
MIAMI, FL 33157 US

*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

**Officer/Director Detail :**

Title            PRES  
Name            MCKENZIE, MARLON R  
Address        10650 S.W. 188TH LANE.  
City-State-Zip: MIAMI FL 33157

Title            PRES  
Name            MARLON, MCKENZIE  
Address        10650 SW 186 LN  
City-State-Zip: MIAMI FL 33157

Title            PRES  
Name            MARLON, MCKENZIE  
Address        10650 SW 186 LN  
City-State-Zip: MIAMI FL 33157

Title            PRES  
Name            MARLON, MCKENZIE  
Address        10650 SW 186 LN  
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Title            PRES  
Name            MARLON, MCKENZIE  
Address        10650 SW 186 LN  
City-State-Zip: MIAMI FL 33157

Title            PRES  
Name            MARLON, MCKENZIE  
Address        10650 SW 186 LN  
City-State-Zip: MIAMI FL 33190

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARLON MCKENZIE

**OWNER**

**01/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date