

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 13 AM 11:43

DOCUMENT # 294322 (3)

1. Corporation Name
MARSARM CORPORATION

Principal Place of Business Mailing Address
10912 S W 25TH ST 10912 S W 25TH ST
MIAMI FL 33165 MIAMI FL 33165

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/28/1965 3a. Date of Last Report 04/28/1994
4. FEI Number 13-1952000 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
BLUM, SAMUEL S
2951 SOUTH BAYSHORE DRIVE, STE 811
COCONUT GROVE FL 33133

10. Name and Address of New Registered Agent
81 Name BLUM, SAMUEL S.
82 Street Address (P.O. Box Number is Not Acceptable) 2666 Tigertail Avenue
83 Suite 106
84 City Miami FL 85 Zip Code 33133

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	MELO, PILAR
STREET ADDRESS	10912 S.W. 25TH STREET
CITY - ST - ZIP	MIAMI FL
TITLE	S
NAME	MUNIZ, EDUARDO
STREET ADDRESS	10912 SW 25TH STREET
CITY - ST - ZIP	MIAMI FL
TITLE	V
NAME	MUNIZ, EDUARDO
STREET ADDRESS	10912 SW 25TH STREET
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	Secretary XX Change <input type="checkbox"/> Addition
2.2 NAME	BENIGNO S. MUNIZ
2.3 STREET ADDRESS	10912 S.W. 25th Street
2.4 CITY - ST - ZIP	Miami, Fla. 33165
3.1 TITLE	Vice-President XX Change <input type="checkbox"/> Addition
3.2 NAME	BENIGNO S. MUNIZ
3.3 STREET ADDRESS	10912 S.W. 25th. Street
3.4 CITY - ST - ZIP	Miami, Fla. 33165
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pilar Melo Muniz 3/7/95 (205) 568-3877
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Phone Number)