

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Feb 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 467536 (9)

1. Corporation Name
MARAN GROVES CORP.



Principal Place of Business
10 SARASOTA CENTER BLVD.
SARASOTA FL 34240

Mailing Address
10 SARASOTA CENTER BLVD.
SARASOTA FL 34240-9770

3. Date Incorporated or Qualified 01/15/1975	3a. Date of Last Report 03/26/1996
4. FEI Number 59-1569099	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	29

9. Name and Address of Current Registered Agent GARDINIER, STEPHANE 10 SARASOTA CTR. BLVD SARASOTA FL 34240	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GARDINIER, XAVIER	1.2 NAME	
STREET ADDRESS	10 SARASOTA CTR. BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	
TITLE	DS ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	GARDINIER, LAURENT	2.2 NAME	
STREET ADDRESS	10 SARASOTA CENTER BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	
TITLE	P ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GARDINIER, STEPHANE	3.2 NAME	
STREET ADDRESS	10 SARASOTA CTR. BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	
TITLE	DT ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	GARDINIER, THIERRY	4.2 NAME	
STREET ADDRESS	10 SARASOTA CENTER BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 recipient 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: STEPHANE GARDINIER 1/28/97 (941) 378-1794
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)