FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** FLORIDA DEPARTMENT OF STATE Jan 28 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** 486587 (9) MARPA CORPORATION Principal Place of Business Mailing Address 11164 NE 8TH CT P.O. BOX 530236 BISCAYNE PARK FL 33161 MIAMI FL 33153 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/21/1975 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 59-1648532 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILITANA, JOHN, ATTNY. 8801 BISCAYNE BLVD Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 83 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITI F DELETE 1.1 T/TI F Change Addition NAME ARNESON, ANTHONY B. 1.2 NAME 11164 N.E. 8TH COURT STREET ADDRESS 1.3 STREET ADDRESS **BISCAYNE PARK FL 33161** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE . Addition Change TITLE 21 TITLE ARNESON, MONICA S. NAME 2.2 NAME 11164 N.E. 8TH COURT STREET ADDRESS 2.3 STREET ADDRESS BISCAYNE PARK FL 33161 CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP

CR2E034

Change

Addition

14. I 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: ANTHONY B. ARNESON TWILLING Barner 10/10/98 892-1021

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP