

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER JULY 28, 1993.
 AMOUNT DUE ON OR BEFORE 7/28/93: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$376)

**CORPORATION
 ANNUAL REPORT
 1997**



FLORIDA DEPARTMENT OF STATE
 Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
Jun 10 1997 8:00am
Secretary of State

1. Name and Mailing Address of Corporation: **DOCUMENT # K 28766**
MARTIN BROTHERS, INC.
3616 S.W. 108th Avenue
Miami, FL 33165

DO NOT WRITE IN THIS SPACE

If above mailing address is incorrect in any way, and through incorrect information and enter correction in Block 2.
 FILING FEE \$225.00
 Annual Report \$61.25 + \$138.75 Corporation Supplemental Fee + \$25.00 Late Fee
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

3. Date Incorporated or Qualified **07-19-88** 3a. Date of Last Report **07-16-96**

4. FEI Number **65-0060677** 4a. Applied For New Address

2. Mailing Address
 21. Suito, Apt. #, etc.
 22. City & State
 23. Zip
 24. Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$138.75 Supplemental Fee Not Required**
 8. This corporation has liability for intangible tax under S. 194.032 Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Felix J. Martin, Esq.
255 Alhambra Circle
Suite 380
Coral Gables, FL 33134

81. Name
 82. Street Address (P.O. Box Number is Not Acceptable)
 83.
 84. City
 85. Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0500 and 607.1508 or Sections 617.0502 and 617.1506, 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 _____ DATE _____
(Signature of Registered Agent required when reporting.)

12. OFFICERS AND DIRECTORS

11 TITLE	President
12 NAME	Fide R. Martin
13 STREET ADDRESS	3616 S.W. 108th Avenue
14 CITY, ST, ZIP	Miami, FL 33165
21 TITLE	Vice-President
22 NAME	Paulino F. Martin
23 STREET ADDRESS	3616 S.W. 108th Avenue
24 CITY, ST, ZIP	Miami, FL 33165
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

13. CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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*****550.00**

14. I 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 in person. I further certify 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12, Book 318 of Corp. or as an attachment with an address.

SIGNATURE: _____
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 5, 1997

Handwritten initials and date: RW 6-10-97