

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

FILED
Feb 10 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P12143 (4)

1. Corporation Name
MARED INDUSTRIES INCORPORATED



Principal Place of Business 15222 KESWICK STREET VAN NUYS CA 91405	Mailing Address 15222 KESWICK STREET VAN NUYS CA 91405-1013
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3. Date Incorporated or Qualified 11/14/1986	3a. Date of Last Report 03/05/1996
4. FEI Number 95-2990436	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> 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
25. Zip	29. Zip
26. Country	30. Country

9. Name and Address of Current Registered Agent

**KOFF, VIOLET
 3528 WHITEHALL DR., BLDG. 8, APT. 205
 WEST PALM BCH. FL 33401**

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

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	P GUTTENBERG, EDWARD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	4320 CEZANNE AVE.	1.2 NAME	
CITY-ST-ZIP	WOODLAND HILLS CA 91384	1.3 STREET ADDRESS	
TITLE	S GUTTENBERG, MARLENE	1.4 CITY-ST-ZIP	
STREET ADDRESS	4320 CEZANNE AVE.	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	WOODLAND HILLS CA 91384	2.2 NAME	
TITLE	CFO CIRINO, PAUL J	2.3 STREET ADDRESS	
STREET ADDRESS	4913 ZAKON RD.	2.4 CITY-ST-ZIP	
CITY-ST-ZIP	TORRANCE CA 90505	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	V NUSSBAUM, LARRY H	3.2 NAME	
STREET ADDRESS	23160 GAINFORD ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WOODLAND HILLS CA 91384	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
TITLE	<input type="checkbox"/> DELETE	4.4 CITY-ST-ZIP	
STREET ADDRESS		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP		5.2 NAME	
TITLE	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	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 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 _____ DATE **1/30/97**

CR2E034 (9/96)