

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

FILED

Mar 21 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 # P94000012555 (6)

1. Corporation Name
MARNIC INVESTMENT CORP.



Principal Place of Business
757 SE 17TH ST CAUSEWAY #610 FT LAUDERDALE FL 33316

Mailing Address
757 SE 17TH ST CAUSEWAY #610 FT LAUDERDALE FL 33316-2960

3. Date Incorporated or Qualified 02/11/1994	3a. Date of Last Report 01/31/1996
4. FEI Number 65-0464753	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 checked="" 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	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent
**DEAMER, PAUL N
757 SE 17TH ST CAUSEWAY #610
FT LAUDERDALE FL 33316**

10. Name and Address of New Registered Agent

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

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 of the person who is registered agent and officer if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.1 NAME D DEAMER, PAUL N	11.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 STREET ADDRESS 757 SE 17TH ST CAUSEWAY #610 FT LAUDERDALE FL 33316	11.2 NAME
12.3 CITY-ST-ZIP FT LAUDERDALE FL 33316	11.3 STREET ADDRESS
12.4 TITLE D	11.4 CITY-ST-ZIP
12.5 NAME DEAMER, FREDERICK G	12.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 STREET ADDRESS 757 SE 17TH ST CAUSEWAY #610 FT LAUDERDALE FL 33316	12.2 NAME
12.7 CITY-ST-ZIP FT LAUDERDALE FL 33316	12.3 STREET ADDRESS
12.8 TITLE D	12.4 CITY-ST-ZIP
12.9 NAME DEAMER, ANDREW M	13.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 STREET ADDRESS 757 SE 17TH ST CAUSEWAY #610 FT LAUDERDALE FL 33316	13.2 NAME
12.11 CITY-ST-ZIP FT LAUDERDALE FL 33316	13.3 STREET ADDRESS
12.12 TITLE <input type="checkbox"/> DELETE	13.4 CITY-ST-ZIP
12.13 NAME	14.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
12.14 STREET ADDRESS	14.2 NAME
12.15 CITY-ST-ZIP	14.3 STREET ADDRESS
12.16 TITLE <input type="checkbox"/> DELETE	14.4 CITY-ST-ZIP
12.17 NAME	15.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
12.18 STREET ADDRESS	15.2 NAME
12.19 CITY-ST-ZIP	15.3 STREET ADDRESS
12.20 TITLE <input type="checkbox"/> DELETE	15.4 CITY-ST-ZIP
12.21 NAME	16.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
12.22 STREET ADDRESS	16.2 NAME
12.23 CITY-ST-ZIP	16.3 STREET ADDRESS
	16.4 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 or is changed, or on an attachment with an address.

SIGNATURE: *Paul Deamer / Pres*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/07/97 (954) 917-0920
Date Daytime Phone #

CR2E034 (9/96)