## -FILE NOW: FILING FEE AFT THAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000017252 1. Corporation Name

MARTH AND INVESTMENTS, INC.

| Principal Place of Business Mailing Address 6100 NW 97TH AVE P.O. BOX 8131 MIAMI FL 33178 HALEAH FL 33012 US  3. Date Incorporate  | niri minyi musi musif musii musin isasi iansia isaac sen   |                              |
|--|--|------------------------------|
| MIAMI FL 33178 HIALEAH FL 33012 US   |  | IA 1181 1881                 |
| 3. Date Incorporate  | OO NOT WRITE IN THIS SPACE                                 | -                            |
| 02/28/1994   | d or Qualifed  |                              |
| 2. Principal Place of Business 2a. Mailing Address 4. FEI Number   | Appli  | ed For                       |
| 21 26 65 0554702   |  | pplicable                    |
| Suite, Apt. #, etc 5, Certificate of State   | us Desired   |                              |
| City & State City & State 6, Election Campaig  | gn Financing _ \$5.00 Ma                                   | av Be                        |
| 23 Z8 Trust Fund Contr   |  |                              |
| Zip Country Zip Country 8; This corporation 24 29 30 Personal Propert  | owes the current year Intangible y Tax.                    | No                           |
|  | ess of New Registered Agent                                |                              |
| 81 Name  |  | <b>x</b>                     |
| MARTINEZ, VICENTE J 6100 N.W. 97TH AVE.  82 Street Address (P.O. Box Number is   | s Not Acceptable)  |                              |
| MIAMI FL 33178   |  | - ,.                         |
| 84 City  | FL 85 Zip Cox  | de                           |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  | hereby accept the appointment as regis                     | tered                        |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)   | DATE   |                              |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)   |  |                              |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)   | IGES TO OFFICERS AND DIRECTORS                             | IN 12                        |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN   | IGES TO OFFICERS AND DIRECTORS                             |                              |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANTILE  D DELETE  1.1 TITLE  | IGES TO OFFICERS AND DIRECTORS                             |                              |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  MARTINEZ, VICENTE J  1.2 NAME   | IGES TO OFFICERS AND DIRECTORS                             |                              |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  NARTINEZ, VICENTE J  STREET ADDRESS  1.3 STREET ADDRESS  1.3 STREET ADDRESS   | IGES TO OFFICERS AND DIRECTORS  Change                     |                              |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  NARTINEZ, VICENTE J  STREET ADDRESS  1.3 STREET ADDRESS  CITY-ST-ZIP  HIALEAH FL  1.4 CITY-ST-ZIP   | IGES TO OFFICERS AND DIRECTORS  Change                     | Addition Addition            |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  NARTINEZ, VICENTE J  1.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  D   DELETE  1.4 CITY-ST-ZIP  TITLE  D   DELETE  2.1 TITLE  A   DELETE  2.1 TITLE  A   DELETE  2.1 TITLE  D   DELETE  2.1 TITLE  D   DELETE  D   DELET   | IGES TO OFFICERS AND DIRECTORS  Change                     | Addition                     |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  MARTINEZ, VICENTE J  1.1 TITLE  1.2 NAME  STREET ADDRESS  CITY-ST-ZIP  HIALEAH FL  1.4 CITY-ST-ZIP  TITLE  D  MARTINEZ, MARIA L  STREET ADDRESS  TOZO W 53 ST  L3 STREET ADDRESS  2.1 TITLE  A  MARTINEZ, MARIA L  STREET ADDRESS  TOZO W 53 ST  L3 STREET ADDRESS  2.3 STREET ADDRESS  CITY-ST-ZIP  HIALEAH FL  2.4 CITY-ST-ZIP  | IGES TO OFFICERS AND DIRECTORS ☐ Change ☐ Change           | Addition                     |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  NARTINEZ, VICENTE J  1.1 TITLE  NAME  1.2 NAME  1.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  D  IDELETE  1.4 CITY-ST-ZIP  TITLE  D  MARTINEZ, MARIA L  STREET ADDRESS  1020 W 53 ST  2.3 STREET ADDRESS  STREET ADDRESS  1020 W 53 ST  2.3 STREET ADDRESS  | IGES TO OFFICERS AND DIRECTORS ☐ Change ☐ Change           | Addition                     |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  MARTINEZ, VICENTE J  1.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  MARTINEZ, MARTA L  STREET ADDRESS  1.3 STREET ADDRESS  CITY-ST-ZIP  TOOLO DELETE  2.1 TITLE  NAME  MARTINEZ, MARTA L  2.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  DELETE  3.1 TITLE  NAME  NAME  NAME  NAME  DELETE  3.1 TITLE  NAME  NAME  NAME  | IGES TO OFFICERS AND DIRECTORS ☐ Change ☐ Change           | Addition                     |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  MARTINEZ, VICENTE J  1.2 NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  D  MARTINEZ, MARIA L  STREET ADDRESS  1.3 STREET ADDRESS  L4 CITY- ST- ZIP  TITLE  NAME  MARTINEZ, MARIA L  STREET ADDRESS  1020 W 53 ST  L3 STREET ADDRESS  L4 CITY- ST- ZIP  TITLE  NAME  STREET ADDRESS  1020 W 53 ST  L3 STREET ADDRESS  L4 CITY- ST- ZIP  TITLE  NAME  STREET ADDRESS   | IGES TO OFFICERS AND DIRECTORS ☐ Change ☐ Change           | Addition                     |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  MARTINEZ, VICENTE J  1.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  MARTINEZ, MARIA L  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  MARTINEZ, MARIA L  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  3.3 STREET ADDRESS  CITY-ST-ZIP  3.4 CITY-ST-ZIP  | IGES TO OFFICERS AND DIRECTORS  ☐ Change ☐ Change ☐ Change | Addition  Addition           |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when refestating)  12. OFFICERS AND DIRECTORS  TITLE  NAME  MARTINEZ, VICENTE J  1.1 TITLE  NAME  STREET ADDRESS  CITY: ST-ZIP  TITLE  D  MARTINEZ, MARIA L  STREET ADDRESS  CITY: ST-ZIP  HIALEAH FL  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY: ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY: ST-ZIP  HIALEAH FL  DELETE  2.1 TITLE  2.2 NAME  3.2 NAME  3.2 NAME  STREET ADDRESS  CITY: ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY: ST-ZIP  TITLE  DELETE  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  CITY: ST-ZIP  TITLE  DELETE  1.4 CITY: ST-ZIP  TITLE  DELETE  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  CITY: ST-ZIP  TITLE  DELETE  4.1 TITLE   | IGES TO OFFICERS AND DIRECTORS  ☐ Change ☐ Change ☐ Change | Addition                     |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  MARTINEZ, VICENTE J  1.1 TITLE  1.2 NAME  STREET ADDRESS  CITY-ST-ZIP  HIALEAH FL  1.4 CITY-ST-ZIP  TITLE  D  MARTINEZ, MARIA L  STREET ADDRESS  CITY-ST-ZIP  HIALEAH FL  1.2 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  DELETE  3.1 TITLE  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  DELETE  4.1 TITLE  NAME  NAME  | IGES TO OFFICERS AND DIRECTORS  ☐ Change ☐ Change ☐ Change | Addition  Addition           |
| Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  TITLE  D  NAME  MARTINEZ, VICENTE J  STREET ADDRESS  1020 W. 53ST  HIALEAH FL  TITLE  D  NAME  MARTINEZ, MARIA L  STREET ADDRESS  1020 W 53 ST  L3. STREET ADDRESS  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  2.1 TITLE  NAME  MARTINEZ, MARIA L  2.2 NAME  STREET ADDRESS  CITY. ST. ZIP  TITLE  NAME  STREET ADDRESS  CITY. ST. ZIP  TITLE  NAME  STREET ADDRESS  CITY. ST. ZIP  TITLE  DELETE  3.1 TITLE  3.3 STREET ADDRESS  CITY. ST. ZIP  TITLE  DELETE  4.1 TITLE  NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY. ST. ZIP  TITLE  DELETE  4.1 TITLE  NAME  STREET ADDRESS  4.3 STREET ADDRESS   | GES TO OFFICERS AND DIRECTORS  Change  Change              | Addition  Addition           |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstabling)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  NARTINEZ, VICENTE J  12 NAME  STREET ADDRESS  1020 W. 53ST  HIALEAH FL  14 CITY-ST-ZIP  TITLE  D  NAME  MARTINEZ, MARIA L  22 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  ACTY-ST-ZIP  DELETE  4.2 NAME  4.2 NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  4.3 STREET ADDRESS  CITY-ST-ZIP  DELETE  4.3 STREET ADDRESS  CITY-ST-ZIP  ACTY-ST-ZIP  DELETE  4.3 STREET ADDRESS  CITY-ST-ZIP  ACTY-ST-ZIP  DELETE  4.4 CITY-ST-ZIP   | GES TO OFFICERS AND DIRECTORS Change Change Change         | Addition Addition Addition   |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when refinishing)  12. OFFICERS AND DIRECTORS    13. ADDITIONS/CHAN   | GES TO OFFICERS AND DIRECTORS Change Change Change         | Addition  Addition           |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algnature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  D   | GES TO OFFICERS AND DIRECTORS Change Change Change         | Addition Addition Addition   |
| Signature, typed or printed name of negistered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  TITLE  NAME  MARTINEZ, VICENTE J  12. NAME  13. STREET ADORESS  1020 W. 53ST  13. STREET ADORESS  1020 W. 53ST  13. STREET ADORESS  11.1 TITLE  14. CITY-ST-ZIP  TITLE  D  MARTINEZ, MARTIA L  22. NAME  33. STREET ADORESS  14. CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  1.1 TITLE  3.1 TITLE  3.2 NAME  3.3 STREET ADORESS  3.4 CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  1.1 TITLE  4.1 TITLE  4.2 NAME  4.2 NAME  4.3 STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  STREET ADORESS   | GES TO OFFICERS AND DIRECTORS Change Change Change         | Addition Addition Addition   |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  ITITLE  D NAME  MARTINEZ, VICENTE J  113 STREET ADORESS  1020 W. 53ST  113 STREET ADORESS  CITY-ST-ZIP  TITLE  D MARTINEZ, MARTA L  12 NAME  MARTINEZ, MARTA L  22 NAME  23 STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  | GES TO OFFICERS AND DIRECTORS Change Change Change         | Addition  Addition  Addition |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algoriture when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  ITITLE  D  NAME  MARTINEZ, VICENTE J  STREET ADDRESS  STREET ADDRESS  CITY- ST-ZIP  TITLE  D  NAME  MARTINEZ, MARIA L  STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  2.1 TITLE  A  ADDITIONS/CHAN  1.2 NAME  AL CITY- ST-ZIP  TITLE  DELETE  3.3 STREET ADDRESS  CITY- ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP  DELETE  4.1 TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  5.3 STREET ADDRESS  CITY- ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  5.3 STREET ADDRESS  STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  5.3 NAME  5.3 STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  5.3 STREET ADDRESS  CITY- ST-ZIP  TITLE  DELETE  5.3 NAME  5.3 NAME  5.3 NAME   | GES TO OFFICERS AND DIRECTORS Change Change Change         | Addition Addition Addition   |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHAN  ITITLE  D  NAME  MARTINEZ, VICENTE J  12. NAME  STREET ADORESS  1020 W. 53ST  13. STREET ADORESS  CITY-ST-ZIP  TITLE  D  NAME  MARTINEZ, MARIA L  22. NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  13. TITLE  33. STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  14. TITLE  A. TITLE  NAME  4. 2 NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  53. STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  STREET ADORESS  CITY-ST-ZIP  TITLE  STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  53. STREET ADORESS  54. CITY-ST-ZIP  TITLE  DELETE  53. STREET ADORESS  54. CITY-ST-ZIP  TITLE  DELETE  55. TITLE  56. TITLE  56. TITLE  56. TITLE  DELETE  56. TITLE  STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  56. TITLE  STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  56. TITLE  STREET ADORESS  STREET ADORESS  STREET ADORESS  STREET ADORESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADORESS  STREET ADORESS | GES TO OFFICERS AND DIRECTORS Change Change Change         | Addition  Addition  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 12 or Block 13 if changed, or on an attachment with an address, with all gither like empowered.

SIGNATURE:

Jun 08, 2000 8:00 am Secretary of State

06-08-2000 90028 003 \*\*\*150.00