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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

DOCUMENT # 1. Corporation Name V01799

(8)



MARLIN GRAPHICS, INC.										
Principal Place of Business 3892 PROSPECT AVE. STE. #5 WEST PALM BEACH FL 33404 US		Mailing Address 3892 PROSPECT AVE. STE. #5 WEST PALM BEACH FL 33404 US				i realia dii dii edidi ilalii addia id	ilo (Bil Dibil Bibli		HEN FIRM IVE	
						ate Incorporated or Qualified 12/20/1991				_
2. Principal Place of Business		2a. Mailing Address				12/20/1331 1 Number	05/01/1995 Applied For			
21		26			"	65-0306819	Not Applicable			-
Suite, Apt. #, etc		Suite, Apt. #, etc. 27			5 . C	ertificate of Status Desired		\$8.75	Additional Required	
City & State		City & State			I	ection Campaign Financing	45.00 ma, 50			
Zip	Country	Z -	Cour	ntrv		ust Fund Contribution iis corporation has liability fo			to Fees	-{
24	25	29	30	,	I		es No	Unidea S	199 032,	
	9. Name and Address of Current	t Registered Agent			10. N	ame and Address of New	Registered A	gent		
6057 HE Palm be	ez, Joseph L. Ather St. Fach Gardens Fl 33418	. 0. 0		82 Street 83 Oty /	Address (P.O. p202 Alm B	ALEZ, JOSE BOXALINIDER IS NOT ACCEPTE DEAKE S EACH GINCDER	TREE (85 Zig	53419	-
SIGNATURE _	o the provisions of Sections 607.050° ad agent, or both is the Grace of the nin and acceptance obligations in Section 1.	(NO)	TE Fagstered		fegured when rens!	പ്പൂ)	4 [74]	190		
12. TITLE	OFFICERS AND	DIRECTORS DEFETE	13.		750 AL	DDITIONS/CHANGES 10 OF				_ ફ
NAME	GONZALEZ, JOSE L. JR.	□] bereig	1 1 TI 1 2 NA		(CON 2 A)	F2 YOSE L.	ir 风	Change	Addition	CR2E034 (12/95)
STREET ADDRESS	6057 HEATHER ST.			REET ADDRESS	10202	EZ, JOSE L., Drake Stree Beach Garden	.T			8
CITY-ST-ZIP	PALM BEACH GARDENS FL			Y ST ZIP	PALM	AFAZH GARDEN	S. FL	- 33	418	님껆
TITLE		☐ DELETE	2 1 11	ILF	1	SS 11 11 - 11 11 - 1		Change	Addition	⊣ö
NAME			2.2 NA	ME						
STREET ADDRESS			2381	REET ADDRESS						
CITY-ST-ZIP				Y-SI 21P			1646 1646	3 96		
TITLE		DELETE	3 1 11			-05/1	7/9601	1008-		
NAME STREET ADDRESS			3 2 NA			****	200.00	****	200.00	
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CITY - ST - ZIP			1	Y-ST-ZIP						
TITLE		DELETŁ	5 1 Ti		<u> </u>			Change	Addition	
NAME *			52 NA	MÉ						
STREET ADDRESS			1	REPLACE LAB						
CITY-ST-ZIP			5.4 CIT	Y-ST ZIP	<u></u>					
TITLE		☐ DELFTE	8 1 Tr	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				Change	Addition	1
NAME			62 NA	ME						
STREET ADDRESS			6351	HEET ADDRESS						
CITY-ST-ZIP			64 01	Y-ST-ZIP	<u> </u>					
14. Loo nereby	certify that the information supplied v	ath this filing is voluntarily furn	ished and d	does not qua	a⊪y for the exe	mption stated in Section 11	9 07(3)(k), Florid	da Statute	es. I further	- 1

certify that the information indicated on this annual report or supplemental angual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the concertion or the required to trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or out or attachment within address

SIGNATURE:

INC OFFICER OR DIRECTOR