

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 APR -4 PM 11:53

DOCUMENT # **V55173** (1)  
1. Corporation Name  
**MARCE EMPREENDIMENTOS, INC.**

Principal Place of Business Mailing Address  
**5061 ASHLEY PKWY SARASOTA FL 34241 US** **5061 AHSLEY PARKWAY SARASOTA FL 34241**

DO NOT WRITE IN THIS SPACE

2. Date Incorporated or Qualified <b>08/04/1992</b>		3a. Date of Last Report <b>04/08/1994</b>	
4. FEI Number <b>65-0354307</b>		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			

21. <b>4931 Ashley Pkwy</b>		22. <b>1605 MAIN ST.</b>	
23. <b>SARASOTA FL</b>		24. <b>SARASOTA, FL</b>	
25. <b>34241 USA</b>		26. <b>34236 USA</b>	

9. Name and Address of Current Registered Agent  
**KAHL, RAYMOND W., JR.  
5061 ASHLEY PARKWAY  
SARASOTA FL 34241**

10. Name and Address of New Registered Agent

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 \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KAHL, RAYMOND W. J</b>	2. NAME	
STREET ADDRESS	<b>5061 ASHLEY PKWY</b>	3. STREET ADDRESS	
CITY - ST - ZIP	<b>SARASOTA FL</b>	4. CITY - ST - ZIP	
TITLE	<b>V</b>	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KAHL, ALAN W.</b>	22. NAME	
STREET ADDRESS	<b>5061 ASHLEY PKWY</b>	23. STREET ADDRESS	
CITY - ST - ZIP	<b>SARASOTA FL</b>	24. CITY - ST - ZIP	
TITLE	<b>S</b>	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KAHL, CECILIA H.</b>	32. NAME	
STREET ADDRESS	<b>5061 ASHLEY PKWY</b>	33. STREET ADDRESS	
CITY - ST - ZIP	<b>SARASOTA FL</b>	34. CITY - ST - ZIP	
TITLE		41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY - ST - ZIP		44. CITY - ST - ZIP	
TITLE		51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY - ST - ZIP		54. CITY - ST - ZIP	
TITLE		61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY - ST - ZIP		64. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 111 (17)(9)(b), Florida Statutes. I further certify that the information furnished on 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 make this report as required by Chapter 107, Florida Statutes, and that my name appears in Block 1 or Block 13 if checked, or on an attachment with this information.

SIGNATURE:

MAR 27 1995 813 925 7267