

DOCUMENT # V55790

1. Entity Name

MARAVI PRODUCTIONS INC.

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90044 041 \*\*\*150.00

Principal Place of Business: 549 SAN ESTEBAN, CORAL GABLES FL 33146, US
Mailing Address: 549 SAN ESTEBAN, CORAL GABLES FL 33146-1336, US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (Suite, Apt. #, etc., City & State, Zip, Country)
3. Mailing Address (Suite, Apt. #, etc., City & State, Zip, Country)

4. FEI Number: 65-0383435
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent: VIVANCOS, MARCIA I, 549 SAN ESTEBAN, CORAL GABLES FL 33146

7. Name and Address of New Registered Agent (Name, Street Address, City, State: FL, Zip Code)

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) [ ]

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. [ ] \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes entries for VIVANCOS, MARCIA I and VIVANCOS, ABDIEL M.

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes checkboxes for Change and Addition.

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Marcia I. Vivancos MARCIA I. VIVANCOS 1/23/00 3056612011
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #