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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

ANN	NUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS		Sec	Secretary of State			
	JMENT # 30856						
MAR-C	REST ENTERPRISES, INC	•		E (EBIED 1HI) BOID 14	Al Dilla Billic Clai Greit Bil	lin Ballin Bedar di Ass	LIBIN (B.O.
			·				
Principal Place of Business Mailing Address 4566 LIVE OAK CHURCH ROAD P.O. BOX 1963						12) #2 4 (1 21 11 11 2 2 2 1 1)	,,,,,,,,,,,,
CRESTVIEW		CRESTVIEW FL 32536-796: US	3				
03		03		3. Date Incorporated		Date of Last Re	eport
2. Principal	Place of Business	2a. Mailing Address	***************************************	08/29/1966 4. FEI Number		3/14/1996 An	plied For
21		26		59-1152157			Applicable
Suite, Ap	ot #, etc	Suite, Apt. #, etc	•	5. Certificate of Statu	s Desired 🔲	\$8.75 / Fee Re	
22 City & St	arte	City & State		6. Election Campaign	Financing	\$5.00	
23]		[28]		Trust Fund Contrib	······································	Added t	o Fees
Ζφ 24	Country	Ζιρ 29	Country 30	8. This corporation h Florida Statutes	as liability for Intangil Yes		199 032,
54]	9. Name and Address of Cur			10. Name and Addre			
	ARTIN, DON A.		81 Name)	1		
	66 LIVE OAK CHURCH ROAD		82 Stree	t Address (P.O. Box Number is	Not Acceptable)		
Cł	RESTVIEW FL 32538		63				
			84 City			. 85 Zip (
office o agent I SIGNATUFIL	at to the provisions of Sections 607.1 registered agent, or both, in the St Lam farmar with, and accept the ot Stgarage, typed or pain a name of registers	origations of, Section 607,0505, Fit	orida Statutes.	rporation's board of directors. I	hereby accept the a		registered
12,		AND DIRECTORS	13.		ES TO OFFICERS A		S IN 12
1(1,F	P	☐ DELETE	1.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
hAM:	MARTIN, D.A.	OAD.	1.2 NAME				
STREEL ADDRÉS CHY-ST-ZIP	S 4566 LIVE OAK CHURCH R CRESTVIEW FL	IOAU	1.3 STREET ADDRESS	1			
THEF	V	DELETE	1.4 CITY - ST - ZIP 2 1 TITLE			☐ Change	Addition
NAME	MARTIN, R. D		2.2 NAME			-	
STREET ANOTHER			2.3 STREET ADDRESS				
CITY - \$1 - ZIP TIBUS	CRESTVIEW FL	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	MARTIN, BRENDA J	FT preset	3.2 NAME			Fil Omnige	CO FIGURAL
SINCLARORES	ARABINE OAK OUUDOUR	OAD	3.3 STREET ADDRESS				
CHY- \$1, 20:	CRESTVIEW FL		3.4. CITY-ST-ZIP				***************************************
1.10		DELETE	4 1 TITLE			☐ Change	Addition
NAME			4.2 NAME				
STREET ADDRESS C. LYS SYS ZOP	`		4.9 STREET ADDRESS 4.4 CITY-S1 - ZIP	†			
11716		DELETE	5.1 TITLE			Change	Add tion
NAME			5 2 NAME				
STREET ADDRESS	s		53 STREET ADDRESS				
Cliv St.761		Planete	5.4 CITY-ST-ZIP			T Charac	Laborat a -
THE NAME		☐ DELETE	6.1 TITLE 6.2 NAME			Change	Addition
- NAM: - SARCEL ADDRES	s		6.3 STREET ADDRESS				
Gily-St-ZiF	"		6.4 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 efficer 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.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904 682 2635 0487872

FILED

May 08 1997 8:00am