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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 435224

(1)

MAR REALTY CORPORATION

Principal Place of Business 741 S. MASHTA DR.

Mailing Address

741 S. MASHTA DR

FILED Apr 29 1997 8:00am Secretary of State



KEY BISCAYNE FL 33149		KEY BISCAYNE FL 33149-1736						
					3. Date Incorporated or Qualified 10/26/1973	3a. Date of Last 08/12/1996		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For		Applied For		
21		26		59-1512413 Not Applica		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00	0 мау Ве	
23		28			Trust Fund Contribution	Added to Fees		
Zip	Country	Ζιρ	Coun	try	8. This corporation has liability for intangible tax under s. 199.032,			
24	25 9. Name and Address of Currer	29	30		Florida Statutes 10. Name and Address of New Rec	Yes No		
ACC	OSTA, MIRIAM	it negistored Agent		Name	10. Name and Address of New Res	haralan whalit		
	S. MASHTA DR.							
	BISCAYNE FL 33149			Street Ad	dress (P.O. Box Number is Not Acceptable	e)		
Met	DIOCATTIC TC 00149		Ī	13				
				City		FL B5 Zig	o Code	
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was	authorized.	by the corpor	rporation submits this statement for the pration's hoard of directors. I hereby accep	urpose of changing	its registered is registered	
SIGNATURE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
12.	Signature, typed or ponted name of registered age OLEBOERS AN	D DIRECTORS (NO:	13.	Agent signature req	jured when relissaring) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTO	10 IAI 20	
TITLE	P	DELETE	1.1 1111		ADDITIONAL TRANSPORTE	Change		
NAME	ACOSTA, ROLANDO		1.2 NAN	1				
STREET ADDRESS	741 S. MASHTA DR.			ET ADDRESS				
CITY-ST-ZIP	KEY BISCAYNE FL 33149	W DIOCAVNIC EL AGAAD		- ST- ZIP				
TITLE	ST	DELETE	2.1 7(1)			☐ Change	Addition	
NAME	ACOSTA, MIRIAM 22%		2.2 NAM	ŧ .				
STREET ADDRESS			23 STR	EF1 ADDRESS)	
CITY-ST-ZIP	KEY BISCAYNE FL 33149		2 4 CH	r - S3 - ZIP				
TITLE		☐ DELETE	3 1 T ITL	:		☐ Change	Addition	
NAME			3 2 NAM	TE				
STREET ADDRESS			3.3 STR	FT ADDRESS				
CITY-ST-ZIP				Y - S1 - ZIP				
TITLE		☐ DELETE	4.1 1 1			Change	Addition	
NAME			4. 2 NAt	i				
STREET ADDRESS			1	TT ADDRESS			ļ	
CITY-ST-ZIP		Perent		- S1 - ZIP		Change	Addition	
TITLE		DELETE	5.1 TH L	i		☐ Change	Addition	
NAME			5.2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITE	- S1 - ZIF		Change	Addition	
NAME		ottit	6.1 HIL 6.2 NAM			Ondrigo		
STREET ADDRESS				ET ADDRESS				
				- S1 - 7IP				
CITY-ST-ZIP			■ 04 UHY	-01-71				

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 officer or director of the comparation or the receiver at trustee emporated to execute this report as required by Chapter 607, Florida Statutes; and that my name