SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)



Sandra B. Mortham

COF ANNU	PROFIT RPORATI JAL REP 1997	FL	FLORIDA DEPARTMENT OF STATE Sendra B. Mortham Secretary of State DIVISION OF CORPORATIONS				50.)	Sep 11 1997 8:00am Secretary of State					
DOCUMENT # 492544 (2) MARANO BUILDERS, INC.									1 15 Biol Biole Hills (1880 Shill)	Dian dia firi	1 81811 81811 9 1811 81	PH 81211 1261	
Principal Plac 756 BARCEL BOCA RATO US	ONA DRIVE	S	756 BAR	Mailing Address 756 BARCELONA DRIVE BOCA RATON FL 33432 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/15/1975 08/19/1996				
2. Principal P 21 Sulte, Apt.	#. etc.	ness	26 Suite, A	Suite, Apt. #, etc.					4. FEI Number 59-1726280 5. Certificate of Status Desire	od []	\$8.75 Fee Ro	oplied For ot Applicable Additional equired	
City & Stat 23 Zip 24		Country 25 and Address of Cu	28 Zip 29	Zip Cou					6. Election Campaign Financing Trust Fund Contribution 3. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
75 BC	to the provis	ONA DR N FL 33432	.0502 and 607.1508, State of Florida. Such bligations of, Section	Florida Statute change was at 607.0505, Flor	s, the at	82 83 84	City		s (P.O. Box Number is Not Acc ation submits this statement fo 's board of directors. I hereby	F	-L []	Code Is registered registered	
	Signature, types	or printed name of registere		e (NOTE	_	Agent	signature	required	when reinstating)	DAT		20 (4) 40	1,
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	756 BA	MI, MARIO RCELONA DR RATON FL	AND DIRECTORS	DELETE	1	ME Ree1 al IY-S1-	DDRESS ZIP	!	ADDITIONS/CHANGES TO	OFFICERS /	Change	Addition	A ACCIONO
NAME STREET ADDRESS CITY-ST-ZIP	BUSCE 756 BA	MI, JUDITH RCELONA DR RATON FL		22 NA 23 ST 2 4 C DELETE 3.1 TI			DDRESS - ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					3.2 NA 3.3 ST	ME	DDRESS - ZIP			·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DELETE .		AME	DDRESS ZIP				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			DELETE	5.1 TIT 5.2 NA 5.3 STI	LE Me	DDRESS				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DELETE	6.1 TIT 6.2 NA 6.3 ST	LE ME	DDRESS				Change	Addition	

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 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 altachment with an address.

FILED