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 # 623869

MARC AND ERIK ENTERPRISES, INC.

(5)

FILED Jan 29 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Addre	SS						
238 HOLLYWOOD F			238 HOLLYWOOD MALL HOLLYWOOD FL 33021-6902						
						3. Date incorporated or Qualified 06/05/1979		ate of Last Re 26/1996	eport
2. Principal P	Place of Business	2a. Mailing Ad	dress		7	4. FEI Number		Ap	pplied For
21		26			59-1913853 Not Applicable				
Suite Apt	# etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re		
City & Stat	0	City & State	e			6. Election Campaign Financing		\$5.00	May Re
23		26				Trust Fund Contribution		Added t	
Zip	Country	Zip		Country	,	8. This corporation has liability for	ntangible	tax under s	199.032,
24	25	29	30				Yes [
	9, Name and Address of Currer	nt Registered Agen	l			10. Name and Address of New Re	gistered	Agent	
	A, MARC M			81	Name				
3530 MYSTIC POINT DRIVE #2807 N. MIAMI BEACH FL 33180					Street Ade	Address (P.O. Box Number is Not Acceptable)			
74. 11	MAN DENSITY E GOTOG			83					
				B4	City		FL	85 Zip (Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.050 registered agont, or both in the State im familiar with, and accept the oblig	02 and 607 1508, Flo of Florida. Such cha ations of, Section 60	rida Statutes, the ange was author 17.0505, Florida S	e above ized by Statute:	e-named co the corpora s.	rporation submits this statement for the pation's board of directors. I hereby accept	urpose of the app	f changing its ointment as	s registered registered
SIGNATURE	Signary, typodia printed hard of expalented ag-	on) and title if Aupticable	(NOTE: Regis	tered Age	ant signature req	uired when reinstating)	DATE		.m.1.3*
12.		ID DIRECTORS	T 1	3.		ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	S IN 12
TOLE	PO		DELETE 1	.1 TITLE			***************************************	Change	Addition
NAME	FRIJA, MARC M		1	2 NAME	- 1				
STREET ADDRESS	3530 MYSTIC PT DR #2807		1	3 STREET	ADDRESS				
City-St-7iP	N. MIAMI BCH. FL 33180		1	.4 CITY- 8	ST-21P				
TITLE			DELETE 2	TITLE				Change	Addition
NAME			2	2 NAME					
STREET ADDRESS			. 2	.3 STREET	ADDRESS	•			
CITY-S1-2IP			2	4 CITY -	ST-ZIP	33			
TITLE			DELETE 3	.1 TITLE				Change	Addition
NAME			3	2 NAME					
STREET ADORESS			3	3 STREET	ADDRESS				
CITY-ST-ZIP			3	4. CITY-	ST-ZIP				
TITLE			DELETE 4	.1 TITLE				Change	Addition
NAME			4	2 NAME					
STREET ADDRESS			4	.3 STREET	ADDRESS				
C-TY-ST-ZiP				4 CITY-S	5T-ZIP				
TITLE			DELETE 5	1 TITLE				Change	Addition
.NAME				.2 NAME					
STREET ADDRESS			5	3 STREET	ADORESS				
CITY ST-719			5	4 CITY-S	ST-ZIP				
TITLE				1 TITLE			***************************************	Change	Addition
NAME				2 NAME					
STREET ADDRESS				3 STREET	ADDRESS				
	į.				-				

64 CiTY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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

SIGNATURE:

CITY-ST-ZIP