FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **623993** **(3)**

1. Corporation Name

MAREST PROPERTIES, INC.

Principal Place of Business

C/O STOLAR. ALLEN D.
290 NW 165TH ST.. #M-400
MIAMI FL 33169

Mailing Address

C/O STOLAR. ALLEN D.
290 NW 165TH ST.. #M-400
MIAMI FL 33169

3. Date Incorporated or Qualified: **06/05/1979**

3a. Date of Last Report: **04/18/1995**

4. FEI Number: **NOT APPLICABLE** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21
22 Street, Apt. #, or P.O. Box
23 City & State
24 Zip
25 County

2a. Mailing Address

26
27 Street, Apt. #, or P.O. Box
28 City & State
29 Zip
30 County

9. Name and Address of Current Registered Agent

STOLAR, ALLEN D., ESQ.
290 NW 165TH ST.
#M-400
MIAMI FL 33169

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1005, Florida Statutes, the above-named Corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The Corporation is qualified to do business in Florida and I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	MARGULES, ESTELLE E.	
STREET ADDRESS	18181 N.E. 31ST CT #706	
CITY-ST-ZIP	N. MIAMI BEACH FL	
TITLE	VSTD	☐ DELETE
NAME	MARGULES,ARLYNNE	
STREET ADDRESS	18181 N.E. 31ST CT #706	
CITY-ST-ZIP	N. MIAMI BEACH FL	
TITLE	TD	☐ DELETE
NAME	MARGULES, MELINDA	
STREET ADDRESS	18181 NE 31 CT #706	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		☐ Change ☐ Addition
1 NAME		
1 STREET ADDRESS		
1 CITY-ST-ZIP		
2 TITLE		☐ Change ☐ Addition
2 NAME		
2 STREET ADDRESS		
2 CITY-ST-ZIP		
3 TITLE		☐ Change ☐ Addition
3 NAME		
3 STREET ADDRESS		
3 CITY-ST-ZIP		
4 TITLE		☐ Change ☐ Addition
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		☐ Change ☐ Addition
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE		☐ Change ☐ Addition
6 NAME		
6 STREET ADDRESS		
6 CITY-ST-ZIP		

CR2E034 (12/95)

14. I hereby 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 12 or Block 13 if changed, or added.

SIGNATURE: Estelle Margules
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ESTELLE E. MARGULES

April 10, 1996 (305) 932-7473