

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 663106 (3)
1. Corporation Name
MARIN-X, INC.



Principal Place of Business: 1470 ALDEN ST., DELAND, FL. 32720
P O BOX 161768
MIAMI FL 33116
Mailing Address: 1470 ALDEN ST., DELAND, FL. 32720
P O BOX 161768
MIAMI FL 33116

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 State, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 12/17/1979	3a. Date of Last Report 01/31/1995
4. FFI Number 59-1994613	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. 198.032 Florida Statutes ☒ Yes ☐ No	
10. Name and Address of New Registered Agent	

CHEATHAM, THOMAS E III
1470 ALDEN ST.
DELAND FL 32720

81 Name THOMAS E. CHEATHAM
82 Street Address (P.O. Box Number is Not Acceptable) 690 WEST 15th STREET
83 City HIALEAH, FL FL
84 Zip Code 33010

11. Pursuant to the provisions of Sections 607.0507 and 607.1502, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0504, Florida Statutes.

SIGNATURE

Signature of Officer or Director

Signature of Agent

Date

12. OFFICERS AND DIRECTORS	
TITLE	PDS
NAME	CHEATHAM, THOMAS E., III
STREET ADDRESS	1470 ALDEN ST.
CITY-STATE-ZIP	DELAND FL
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	☒ Change ☐ Addition
2. NAME	
3. NAME	
4. NAME	
5. NAME	
6. NAME	
7. NAME	
8. NAME	
9. NAME	
10. NAME	
11. NAME	
12. NAME	
13. NAME	
14. NAME	
15. NAME	
16. NAME	
17. NAME	
18. NAME	
19. NAME	
20. NAME	

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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 attachment with an address.

SIGNATURE: *TE Cheatham*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 7, 1996 (718) 358-2559

CR2E034 (12/95)