

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F17367 (6)

1. Corporation Name

MARCON MANAGEMENT CORP., LTD.



Principal Place of Business

Mailing Address

200 S. BISCAYNE BLVD.  
SUITE 4500  
MIAMI FL 33131

200 S. BISCAYNE BLVD.  
SUITE 4500  
MIAMI FL 33131

3. Date Incorporated or Qualified  
01/23/1981

3a. Date of Last Report  
03/28/1995

2. Principal Place of Business

2a. Mailing Address

21 201 S. BISCAYNE BLVD.

26 201 S. BISCAYNE BLVD.

4. FEI Number

59-2087299

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 TEN + BEASLEY - 26TH FLOOR

27 TEN + BEASLEY - 26TH FLOOR

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

City & State

23 MIAMI, FLORIDA

28 MIAMI, FLORIDA

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

Zip

Country

Zip

Country

24 33131-4336 25 U.S.A.

29 33131-4336 30 U.S.A.

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TAGUE, BRIAN ESQUIRE  
% MERSHON, SAWYER ET. AL.  
200 S. BISCAYNE BLVD., SUITE 4500  
MIAMI FL 33131

81 Name

TAGUE, BRIAN ESQUIRE

82 Street Address (P.O. Box Number is Not Acceptable)

910 TEN + BEASLEY

83

201 SOUTH BISCAYNE BLVD., 26TH FLR.

84 City

MIAMI

FL

85 Zip Code

33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

NOTE - CHANGE OF ADDRESS ONLY

Signature typed in print of registered agent and if not applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME ARBUCK, MARVIN L  
STREET ADDRESS 20 BREEN CRESCENT  
CITY - ST - ZIP WILLOWDALE, ONT. CANADA

☐ DELETE

TITLE PST  
NAME ARBUCK, MARVIN L  
STREET ADDRESS 20 BREEN CRESCENT  
CITY - ST - ZIP WILLOWDALE, ONT. CANADA

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARVIN L.

ARBUCK

July 19/96 (416)-225-8345

CR2E034 (3/96)