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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

F59121

(6)

LARRY	S. MARKS CONSTRUCT	ION CO.			
Principal Place	of Business	Mailing Address			
		7302 S.W. 42ND STI MIAMI FL 33155	REET		
				 Date Incorporated or Qualified 12/22/1981 	3a. Date of Last Report 02/13/1995
2. Principal Pia	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		59-2147182	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State)	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	9. Name and Address of Curr	29	[30]	Fiorida Statutes Yes 10. Name and Address of New Re	
	g. Name and Address of Cur	ent negistered Agent	81 Name	10. Rame and Address of New No.	sgistered Agenit
MADIC	LARRY S.				
	W. 42ND ST.		82 Street Ad	ldress (P.O. Box Number is Not Acceptable	e)
	L 33155-4508		83		
INID-CIVIL I	2 00 100-1000				
			84 City		FL 85 Zip Code
or register		orida. Such change was autho	rized by the corporation's bo	oration submits this statement for the purpoard of directors. I hereby accept the appo	
SIGNATURE	, , , , , , ,				
	Signature, typod or printed name of registereo ag		NOTE: Registered Agent signature requ		DATE
12.	,	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	DP LADDY C	DELETE	1. 1 TITLE		Change Addition
NAME	MARKS, LARRY S 7302 S.W. 42ND ST.		1.2 NAME		
STREET ADDRESS	7302 3.W. 42NO 31.		1.3 STREET ADORESS 1.4 CITY - ST - ZIP		
CITY-SI-ZIP TITLE	MICMITE	[] DELETE	2.17(1LE		Change Addition
NAME		<u></u>	2.2 NAME		
STREET ADDRESS			2.3 STREET ADORESS		
CITY-ST-ZIP			2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			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		
CITY-ST-ZIP		□ belett	4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5. 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-SI-ZIP TITLE		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
DITY-ST-ZiP			6.4 City-St-Zip		
14 Ldo bereb	y certify that the information supplie	d with this filing is voluntarily fu	imiched and does not qualify	y for the exemption stated in Section 119.0	07(3)(k), Florida Statutes. I further
certify that oath; that appears in	t the information indicated on this a I am an officer or director of the co n Block 12 or Block 13 if changed, c	inual report or supplemental a poration or the receiver of trus or on an attachment with an ac	nnual aport is true and accu stee of powered to execute l idre.s.	rrate and that my signature shall have the s this report as required by Chapter 607, Flo	same legal effect as if made under rida Statutes; and that my name

SIGNATURE

April 11, 1996 305/267-7800