## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Corporation	MENT # F5912 S. MARKS CONSTRUCTION	` '			II JULI 201 E E E E E E
Principal Place of Business		Mailing Address		T TO DIVERD LIBIT CHIEF TO THE FLOOR THOU THE BURNER OF	TIT GIRLI BIRIT BIRIT ALDIT HRAL
7302 S.W. 42ND STREET MIAMI FL 33155		7302 S.W. 42ND STREET Miami Fl 33155			
				DO NOT WRITE IN THE  3. Date Incorporated or Qualified	3 SPACE
				12/22/1981	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied f or
21		26		59-2147182	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stato		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 owes or has paid the c	: :
24	9. Name and Address of Curre	[29]	[30]	Personal Property Tax due June 30.  10. Name and Address of New Registere.	Yes No
		aut Medisteren Maur	81 Name	It. Name and Address of New Pagisters	n when
MARKS, LARRY S. 7302 S.W. 42ND ST. MIAMI FL 33155-4508			00 00-00	ress (P.O. Box Number is Not Acceptable)	
			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City	=	85 Zip Code
office or re agent ∃ar SIGNATURI	egistrind agent, or both, in the Stat in familiar with, and accept the obti	le of Florida. Such change was a gations of, Section 607.0505, Flo	authorized by the corpora orida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered population as registered
12.	Signature typestic protectionne of regeneral a OFFICERS AF	ND DIRECTORS	Flegistered Agent signature requi	red when roinstating) DATE ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12
DILE	DP	DELETE	1.1 TOLE		Change Addition
NAME	MARKS, LARRY S		1.2 NAME		
STREET ADDRESS	7302 S.W. 42ND ST.		1.3 STREET ADDRESS		
CITY ST ZIP	MIAMI FL	DELFTE	1.4 CHY-ST-ZIP 2.1 THILE		Change Addition
NAME		₽ ott it	2 2 NAME		
STREET ADDRESS			23 STREET ADDRESS		
CITY-ST-ZIP			2 4 CHY-S1-ZIP		
TITLE		DELF IE	3 1 TILLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREF ! ADDRESS		
TITLE		DILETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		<u></u>	4 2 NAME		<u> </u>
STREET ADDRESS			43 STREET ADDRESS		
CHY-SI-ZIP			4.4 CITY - S1 - ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAM(		
STREET ADDRESS			5.3 STREET ADDRESS		
DITY-ST-ZIP		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE		Change Addition
TITLE NAME		( pretit	62 NAME		ET CHANGE ET MORITOR
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST: 7IP		_	6 4 CITY - ST - ZIP		
14. I hereby o	ertify that the information supplied	with the filing does not qualify to		Section 119.07(3)(i), Florida Statutes. I further	certify that the information
officer or o	on this abnual report or supplemen director of the corporation or the re- or Block 13 if changed, or an an	lay anityal report is true and acc rayy or trusted empowered to come of them address.	cutely in Theoret at Jac	Section 119.07(3)(i), Florida Statutes. I further ire shall have the same legal effect as if made in uired by Chapter 607, Florida Statutes; and tha	t my name appears in

SIGNATURE:

3/17/98 267-7800

**FILED** 

Apr 22 1998 8:00am

Secretary of State