

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

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90101 018 ***158.75



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # F71909

1. Corporation Name
MARIN & ASSOCIATES, INC.

Principal Place of Business 8491 NW 17 ST 113 MIAMI FL 33126 US	Mailing Address 6480 SW 107 ST MIAMI FL 33156 US
---	---

3. Date Incorporated or Qualified
03/10/1982

2. Principal Place of Business 21 3350 NW 2 Ave	2a. Mailing Address 26 3350 NW 2 Ave
Suite, Apt. #, etc. 22 # A-6	Suite, Apt. #, etc. 27 # A-6
City & State 23 BOCA RATON, FL	City & State 28 BOCA RATON, FL
Zip 24 33431	Country 25 Palm Bch
Zip 29 33431	Country 30 Palm Bch

4. FEI Number
59-2178975

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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

CARLOS M. MARIN, JR.
6480 SW 107 ST
MIAMI FL 33156

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 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: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE PD	<input type="checkbox"/> DELETE
NAME MARIN, CARLOS M JR.	
STREET ADDRESS 8491 NW 17TH ST, STE 113	
CITY-ST-ZIP MIAMI FL 33126	
TITLE S	<input type="checkbox"/> DELETE
NAME CARLOS MRIN, SR.	
STREET ADDRESS 8491 NW 17TH ST, STE 113	
CITY-ST-ZIP MIAMI FL 33126	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CARLOS MARIN JR.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME 3350 NW 2 AV #A-6	
1.3 STREET ADDRESS BOCA RATON, FL	
1.4 CITY-ST-ZIP 33431	
2.1 TITLE CARLOS MARIN SR.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME 3350 NW 2 AV #A-6	
2.3 STREET ADDRESS BOCA RATON, FL	
2.4 CITY-ST-ZIP 33431	
3.1 TITLE Cecilia C. MARIN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME 3350 NW 2 AV #A-6	
3.3 STREET ADDRESS BOCA RATON, FL	
3.4 CITY-ST-ZIP 33431	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: **CARLOS M. MARIN JR.** H-15-99 -4480

CR2E034 (1/198)