FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 16 PM 2:57

DOCUMENT # **F94000000580 (0)**

1. Corporation Name
MARVEL III HOLDINGS INC.

Principal Place of Business	Mailing Address
SUITE 700-A 5900 NORTH ANDREWS AVENUE FORT LAUDERDALE FL 33309	SUITE 700-A 5900 NORTH ANDREWS AVENUE FORT LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/07/1994**
3a. Date of Last Report:

2. Principal Place of Business
21:
22. Suite, Apt. #, etc.:
23. City & State:
24. Zip:
25. Country:

2a. Mailing Address
26:
27. Suite, Apt. #, etc.:
28. City & State:
29. Zip:
30. Country:

4. FEI Number: **13-3751020** ☐ 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. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
SUITE 105
1201 HAYS STREET
TALLAHASSEE FL 32301

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 (Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing agent) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	COBD	11 TITLE	☐ Change ☐ Addition
NAME	PERELMAN, RONALD O	12 NAME	
STREET ADDRESS	35 EAST 62ND STREET	13 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10021	14 CITY-ST-ZIP	
TITLE	PCEO	21 TITLE	☐ Change ☐ Addition
NAME	BEVINS, WILLIAM C	22 NAME	
STREET ADDRESS	35 EAST 62ND STREET	23 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10021	24 CITY-ST-ZIP	
TITLE	VCD	31 TITLE	☐ Change ☐ Addition
NAME	DRAPKIN, DONALD G	32 NAME	
STREET ADDRESS	35 EAST 62ND STREET	33 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10021	34 CITY-ST-ZIP	
TITLE	VCFO	41 TITLE	☐ Change ☐ Addition
NAME	ENGELMAN, IRWIN	42 NAME	
STREET ADDRESS	35 EAST 62ND STREET	43 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10021	44 CITY-ST-ZIP	
TITLE	VS	51 TITLE	☐ Change ☐ Addition
NAME	GORDON, HOWARD F	52 NAME	
STREET ADDRESS	5900 NORTH ANDREWS AVENUE	53 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	54 CITY-ST-ZIP	
TITLE	VC	61 TITLE	☐ Change ☐ Addition
NAME	WINOKER, LAURENCE	62 NAME	
STREET ADDRESS	625 MADISON AVENUE	63 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10021	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is substantially complete and accurate, and that my electronic 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 above, or on an attachment with an address.

SIGNATURE: [signature] Secretary 2/15/95 (305) 772-4306
(SIGNATURE AND TYPE OR PRINTED NAME OF FOREGOING OFFICER OR DIRECTOR) (DATE) (TELEPHONE NUMBER)

0217200 CP