

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000000580 (0)

1. Corporation Name

MARVEL III HOLDINGS INC.



Principal Place of Business

SUITE 700-A
5900 NORTH ANDREWS AVENUE
FORT LAUDERDALE FL 33309

Mailing Address

SUITE 700-A
5900 NORTH ANDREWS AVENUE
FORT LAUDERDALE FL 33309

3. Date Incorporated or Qualified
02/07/1994

3a. Date of Last Report
02/16/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 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

Signature, typed or printed name of registered agent and the filer, if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE COBD
NAME PERELMAN, RONALD O
STREET ADDRESS 35 EAST 62ND STREET
CITY-STATE-ZIP NEW YORK NY 10021
☐ DELETE

TITLE PCED
NAME BEVINS, WILLIAM C
STREET ADDRESS 35 EAST 62ND STREET
CITY-STATE-ZIP NEW YORK NY 10021
☐ DELETE

TITLE VCD
NAME DRAPKIN, DONALD G
STREET ADDRESS 35 EAST 62ND STREET
CITY-STATE-ZIP NEW YORK NY 10021
☐ DELETE

TITLE VCFO
NAME ENGELMAN, IRWIN
STREET ADDRESS 35 EAST 62ND STREET
CITY-STATE-ZIP NEW YORK NY 10021
☐ DELETE

TITLE VS
NAME GORDON, HOWARD F
STREET ADDRESS 5900 NORTH ANDREWS AVENUE
CITY-STATE-ZIP FORT LAUDERDALE FL 33309
☐ DELETE

TITLE VC
NAME WINOKER, LAURENCE
STREET ADDRESS 625 MADISON AVENUE
CITY-STATE-ZIP NEW YORK NY 10021
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/96 <954> 772-4306

Date

Daytime Phone #

CR2E034 (12/95)