**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Jan 09 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # F97331 (5) PFEFFER & MARIN MANAGEMENT CORP. Principal Place of Business Mailing Address % JOSEPH MARIN % JOSEPH MARIN 4767 NW 36TH ST 4767 NW 36TH ST DO NOT WRITE IN THIS SPACE MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33166 3. Date Incorporated or Qualified 08/30/1982 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 59-2216110 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 26 Trust Fund Contribution Added to Fees 23 Country Zip Country Zip 8. This corporation owes or has paid the current year Inlangible ☐ Yes Personal Properly Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MARIN, JOSEPH 4767 NW 36TH ST Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33166** 83 84 Zip Code City 85 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 range of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE Change Addition PD 1.1 TITLE TITLE NAME PFEFFER. PAUL 1.2 NAME 4767 NW 36TH ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI SPRINGS FL 1.4 CITY - ST - ZIP CITY - ST- ZIP DELETE Change Addition 2.1 TITLE TITLE MARIN, JOSEPH 2.2 NAME STREET ADDRESS 4707 NW 36TH ST 2.3 STREET ADDRESS MIAMI SPRINGS FL CITY - ST - ZIP 2. 4 CITY - ST - ZIP ☐ Addilion \_\_ Change □ DELETE 3.1 THILE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADORESS City-St-ZIP 3.4. CITY - \$1 - ZIP \_\_\_ Addition DELETE ☐ Change 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 HILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6.1 7/11 8 Change Addition TITLE

14. Thereby 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.

6.2 NAME 6.3 STREET ADDRESS

CIGNATURE

NAME

STREET ADDRESS CITY-ST-ZIP

TASEPH MARIN

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