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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G09137

(2)

MAR-GUY ENTERPRISES, INC.

FILED
May 21 1998 8:00am
Secretary of State



Mailing Address Principal Place of Business 5520 TAYLOR ST % GRADY GUY 5520 TAYLOR ST. HOLLYWOOD FL 33021 DO NOT WRITE IN THIS SPACE HOLLYWOOD FL \$3021 3. Date Incorporated or Qualified 11/22/1982 2. Principal Place of Business 2a. Mailing Address **FEI Number** Applied For RT16 Bx538 RT16 By 538 59-2227550 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 Cily & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GUY, GRADY 5520 TAYLOR ST 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 83 84 City Zip Code 32055 MUZ CITY 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. Lam familiar with, and accept the obligation of the State of Florida Statutes. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TITLE 1.1 TITLE **GUY, GRADY** NAME 1.2 NAME 5520 TAYLOR ST 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 2.1 TITLE MARKARET OVY **GUY, MARGARET** 2.2 NAME NAME P+16 B4538 5520 TAYLOR ST 2.3 STREET ADDRESS STREET ADORESS HOLLYWOOD FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-S1-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - \$1 - ZIP CITY-ST-ZIP 14. If 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 a address.

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