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PROFIT CORPORATION ANNUAL REPORT



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

1996

MARCO BEACH RENTALS, INC. Principal Place of Business SOO N. COLLIER BLVD. P. O. BOX 8088 MARCO ISLAND FL 33969 US 3. Date incorporated or Oualified 03/22/1995 2. Principal Place of Business 2a. Mailing Address US 3. Date incorporated or Oualified 03/22/1995 4. FEI Number 59-2780482 Not Applied For Not Applicable 59-2780482 Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Applied For Solditional Fee Required Fee Required Fee Required Financing 55.00 May Be Added to Fees Added to Fees Country Applied For Solditional Fee Required Fee Required Financing 55.00 May Be Added to Fees Financing 55.00 May Be Added to Fees	DOCUN 1. Corporation	MENT # G3186	32 (7)					
No. Court Purpose								
Principal Piace of Business 2a. Maining Address 2b. Maining Address 2b. Part No. 1 2b. Suite, April 4, etc. 2b. Suite	900 N. COLLIER BLVD. P. O. BOX 8088		900 N. COLLIER BLVD. P. O. BOX 8088			 	Q(Q() \$103) (Q)(
Salito, April 4, etc. Salito, April 5, etc. Salito, April 5, etc. Salito, April 5, etc. Salito, April 5, etc. Salito, April 6, etc. Salit			US			1	3a. Date of Last F 03/22/19	teport 95
City & State	Principal Place of Business The Principal Place of Business				4. FEI Number 59-2780482		· · · · · · · · · · · · · · · · · ·	
28	Suite, Apt. #, etc.		þ-a-n		5. Certificate of Status Desired			
25 26 26 30 30 Elevado Statutes 20 Yes No.	City & State				, -			
ANTARAMIAN, JACK J. 900 N. COLLIER BLVD. MARCO ISLAND FL 33937 83 84 City FL 85 Zip Code T1. Pursuant to the provisions of Sections 607,0502 and 607 1508, Florida Statutes, the document of the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the comparation 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 comparation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the comparation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the comparation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the comparation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the comparation's board of directors. I hereby accept the appointment as registered office. SCONATURE SUBJECT (ST. 20) 12. VO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11.1 THE 1.2 NAME 1.3 INTEL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 1.1 THE 1.2 NAME 1.3 INTEL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 1.1 THE 2.1 THE 3.1 THE 3.2 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 1.1 THE 2.2 NAME 3.3 STEET ADDITIONS. 3.3 STEET ADDITIONS. 3.4 STEET ADDITIONS. 3.5 THE ADDITIONS. 3.5	Zip 24	25 29		<u> </u>		Florida Statutes 🔀 Yes No		
ANTARAMIAN, JACK J. 900 N. COLLIER BLVD. MARCO ISLAND FL 33937 B4		9. Name and Address of Curre	nt Registered Agent	91	Nome	10. Name and Address of New F	tegistered Agent	
SOO N. COLLER BLVD. Set Street Actoress (n.C.). But Not note is the Not Accopatable)	ANTARA	MIAN, JACK J.						
Section Sect	900 N. COLUER BLVD.			82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)	
1.1. 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 framework, and accept the obligations of, Section 607.0506, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. ITILE NASSIF, DAVID 12. AMME SIREEL ADDRESS CITY-ST-2P AND DELETE 13. TIREE ADDRESS CITY-ST-2P AND ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. AMME 13. STREEL ADDRESS CITY-ST-2P AND ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. STREEL ADDRESS CITY-ST-2P AND CHANGES CITY-ST-2P AS SCHULKIN, MARTIN B. 23. CAUTY-ST-2P TILE AS CITY-ST-2P AS SCHULKIN, MARTIN B. 23. CAUTY-ST-2P TILE AS CITY-ST-2P AS CITY-ST-2P AS CITY-ST-2P AS CITY-ST-2P AS AS SIREEL ADDRESS CITY-ST-2P AS AS SIREEL ADDRESS CITY-ST-2P AS SIREEL ADDRESS CITY-ST-2P AS SIREEL ADDRESS CITY-ST-2P ADDRESS CITY-ST-2P ADDRESS CITY-ST-2P AS CI	MARCO	ISLAND FL 33937		83				
1. Persuant to the provisions of Sections 607.0502 and 607.1506, Fiorida Statuties, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, in the State of Prioride. Such change was submits the statement for the purpose of changing its registered office or registered agent, in the in, in the State of Prioride. Such change was submits the statement for the purpose of changing its registered of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. International Compute Computer of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. International Computer Co				84	City		FL 85 Z	ıp Code
12	or registere	ed agent, or both, in the State of Flor	ida. Such change was authorized	, the above-r by the corp	named corpo oration's boa	ration submits this statement for the pured of directors. I hereby accept the app	rpose of changing its ointment as registered	registered office d agent. I am
12.			a special control of the special control of t			·		
Title					nt signature require			ORS IN 12
STREEL ADDRESS		VD	F			1100111011010111110101101011	······	· · · · · · · · · · · · · · · ·
WELLESLY MA	NAME			1.2 NAME				
PTD	STREET ADDRESS			1.3 STREET	ADDRESS			
NAME STREET ADDRESS C-TY-ST-ZPP ANTARAMIAN, JACK 3725 FT. CHARLES DR. AS DELETE 3 1 TITLE AS C-TY-ST-ZPP AS Addition			18.1		ST- ZIP			
STREET ADDRESS C-17V-ST-2P			N IACK				∐ Change	☐ Addition
NAPLES FL 24 CITY-ST-ZIP AS DELETE 3 1 TITLE Change Addition		3725 ET CHADIES DD			ADDRESS			
Title								
STREET ADDRESS 23 COUNTRY DR. 33 STREET ADDRESS 34 CITY - ST - ZIP							Change	Addition
WESTON MA	NAME		_					
DELETE	STREET ADDRESS		3.3 S		T ADDRESS			
NAME KORCOUREK, DAVID A. 1170 CARA CT. 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP		WESTON MA			ST - 21P			
1170 CARA CT.		KORCOLIREK DAVID A	☐ DETEI¥				Change	Addition
MARCO ISLAND FL								
NAME MALLOY, WILLIAM T. SZ NAME SZ NAM								
MALLOY, WILLIAM T. 828 HIDEAWAY CIRCLE, E., #417 53 STREET ADDRESS MARCO ISLAND FL 54 CITY-ST-ZIP		-v	□ DELETE.				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP AS WEINSTEIN, ROBERT STREET ADDRESS CITY-ST-ZIP DELETE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 6.1 TITLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.5 NAME 6.5 NAME 6.5 STREET ADDRESS 6.4 CITY-ST-ZIP 6.6 TITLE 6.7 NAME 6.7 NAME 6.7 NAME 6.8 STREET ADDRESS 6.4 CITY-ST-ZIP							<u> </u>	
AS					ADDRESS			
WEINSTEIN, ROBERT STREET ADDRESS CITY-ST-ZIP WEINSTEIN, ROBERT 25 MANOR HOUSE RD. NEWTON MA 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP 64 CITY-ST-ZIP	CITY - ST - ZIP			5.4 CITY - S	ST-ZIP			
STREET ADDRESS CITY-ST-ZIP 25 MANOR HOUSE RD. 63 STREET ADDRESS 64 CITY-ST-ZIP	TITLE		DELETE	6. 1 TITLE			☐ Change	Addition
CITY-ST-ZIP NEWTON MA 64 CITY-ST-ZIP								
UIT-51-21F								
			with this fling is unluntarily furnish			for the exemption stated in Section 110	07(3)(k) Florida Statu	ites 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 charged, or on an attachment with an address. 4/22/96 941 394-2505 Delto Describe Po

SIGNATURE: WILLIAM THEO OR PRINTED NAME OF SIGNAM