1995 — Secretary of State, DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 9:05

DOCUMENT # G77680 (8)

1. Corporation Name
MARCA ENTERPRISES, INC.

Principal Place of Business	Mailing Address
7500 SOUTHGATE BLVD NORTH LAUDERDALE FL 33068	7500 SOUTHGATE BLVD NORTH LAUDERDALE FL 33068

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
12/06/1983	05/01/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number: 59-2356198 ☐ 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

SCHIMMEL ROBERT L
3191 CORAL WAY PH-2
MIAMI FL 33145

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	RITTER JAMES R	1.2 NAME	
STREET ADDRESS	7500 SOUTHGATE BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	N LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	☐ Change ☐ Addition
NAME	RITTER RAYMOND A	2.2 NAME	
STREET ADDRESS	7500 SOUTHGATE BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	N LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE	STR	3.1 TITLE	☐ Change ☐ Addition
NAME	BETZ JACQUELYN	3.2 NAME	
STREET ADDRESS	7500 SOUTHGATE BLVD	3.3 STREET ADDRESS	
CITY-ST-ZIP	N LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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)(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.

SIGNATURE: JAMES R. RITTER PRES 4/3/95 1-305 721-0580
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0111050 CP