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FILED

**Jan 29 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # G77680 (8)

1. Corporation Name
MARCA ENTERPRISES, INC.



Principal Place of Business: **7500 SOUTHGATE BLVD
NORTH LAUDERDALE FL 33068**
Mailing Address: **7500 SOUTHGATE BLVD
NORTH LAUDERDALE FL 33068-1362**

3. Date Incorporated or Qualified 12/06/1983	3a. Date of Last Report 02/02/1996
4. FEI Number 59-2356198	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 Zip Code **FL**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RITTER JAMES R	
STREET ADDRESS	7500 SOUTHGATE BLVD	
CITY-ST-ZIP	N LAUDERDALE FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	RITTER RAYMOND A	
STREET ADDRESS	7500 SOUTHGATE BLVD	
CITY-ST-ZIP	N LAUDERDALE FL	
TITLE	STR	<input checked="" type="checkbox"/> DELETE
NAME	BETZ JACQUELYN	
STREET ADDRESS	7500 SOUTHGATE BLVD	
CITY-ST-ZIP	N LAUDERDALE FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	RITTER, JOYCE	
STREET ADDRESS	7500 SOUTHGATE BLVD	
CITY-ST-ZIP	N LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	VPD Ritter, James R
5.3 STREET ADDRESS	7500 Southgate Blvd
5.4 CITY-ST-ZIP	N LAUDERDALE FLA 33068
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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, unchanged, or on an attachment with an address.

SIGNATURE: _____ DATE: **1/17/97** DAYTIME PHONE #: **305-251-4777**

CR2E034 (9/96)