## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

## May 17, 1999 8:00 am **PROFIT** FLORIDA DEPARTMENT OF STATE Secretary of State CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 05-17-1999 90038 032 \*\*\*158.75 1999 DIVISION OF CORPORATIONS DOCUMENT # G84551 1. Corporation Name Mal-Mar Merchandising, Inc. Principal Place of Business Mailing Address 10630 S.W. 89Th Court 10630 S.W. 89Th Court Miami, Fl 33176-3711 Miami, Fl 33176-3711 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/14/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2415761 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation owes the current year Intangible Personal Zip ХNо 25 29 Property Tax. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) Reisman, Marcia M. 1,0630 S.W. 89Th Court 83 Miami, Fl 33176 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. TITLE PDDELETE 1.1 TITLE Change E034 NAME Reisman, Marcia M 1.2 NAME STREET ADDRESS 10630 S.W.89Th Court 1.3 STREET ADDRESS Miami, Fl 33176 CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE Change Reisman, Terry M. 10630 S.W 89Th Court NAME STREET ADDRESS 2.3 STREET ADDRESS Miami, Fl 33176 CITY - ST - ZIP 2.4 CITY - ST - ZIP Addition DELETE TITLE 3.1 TITLE Chance 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Addition TITLE 4.1 TITLE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP Addition TITLE DELETE 6.1 TITLE Change 6.2 NAME

14. I 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 eath; 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 . CITY - ST - ZIP

SIGNATURE: Maisia M. REIS MARCIA M. REIS	MAN	4/29	/99	(305)274-6	296
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	$\overline{}$		Daytime Phone #	

NAME STREET ADDRESS

CITY - ST - ZIP