FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUN 1. Corporation		14 (0)			
MARSO	N EXPORT & IMPORT, IN	IC.			(a) B(a) (\$(B(a) B) (a) B(b) (\$(B(a) B) (a) (B) (a)
Principal Place of Business		Mailing Address		I IOBIBIL BRIL BAIDI KIBII OGIBI IIDIL O	IN PIPIT BINIT NINII NENII NINII NINII NINII INNI
10874 S. W. 154 TERR. MIAMI FL 33157		10874 S. W. 154 TER Miami Fl 33157	R.		
				3. Date Incorporated or Qualified 04/24/1984	3a. Date of Last Report 04/04/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2406937	Not Applicable \$8.75 Additional
Stille, Apt. #, etc.		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 мау Ве
23		28		Trust i di la Contribution	Added to Fees
Zip	Country 25	Zip 29	Country 30	8. This corporation has liability for interest Florida Statutes	=
24	9. Name and Address of Curre		30	10. Name and Address of New Re	
			81 Name		
ROSS, MARJORIE M.			82 Street Add	dress (P.O. Box Number is Not Acceptable	· · · · · · · · · · · · · · · · · · ·
10874 S.W. 154 TERR.					
MIAMI FL 33157			83		
			84 City		FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607.050	02 and 607.1508, Florida Statu	tes, the above-named corp	oration submits this statement for the purp	ose of charging its registered office
or registere	ed agent, or both, in the State of Flo n, and accept the obligations of, Se	rida. Such change was authori:	zed by the corporation's bo	pard of directors. I hereby accept the appoi	ntment as registered agent. I am
SIGNATURE	,, =				
5	Signature typed or printed name of registered age		OTE: Registered Agent signature requi	ired when reinstating: ADDITIONS/CHANGES TO OFFIC	DATE PERS AND DIRECTORS IN 12
12.	D OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	ROSS, MARJORIE M.	[] beceiv	1.2 NAME		
STREET ADDRESS	10874 S.W. 154 TERR.		1.3 STREET ADDRESS		
CiTY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	2. 1 TITLE		Change Addition
NAME	ROSS, ARTHUR		. 2.2 NAME		
STREET ADDRESS	10874 S.W. 154 TERR.		2.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL	E Stretc	2 4 CITY-ST-7IP		Change Addition
TOTLE	D ADADITO PONODALI I	☐ DEFELE	3 1 TITLE		☐ Change ☐ Addition
NAME	ARABITG, DEVORAH J 12740 S W 149 ST		3.2 NAME 3.3. STREET ADDRESS		
STREET ADORESS CITY-ST-ZIP	MIAMI FL		34 CITY-ST-ZIP		
Trite	D	DELETE	4 1 TITLE		Change Addition
NAME	LABRADA, JOANNA S		4.2 NAME		
STREET ADDRESS	15612 S W 105 AVE		4.3 STREET ADDRESS		
C(1Y - S1 - Z(P	MIAMI FL		4.4 CITY - ST - ZIP		
TITLE		☐ DEFELE	5. 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-7IP		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
TITLE NAME		C) beter	6 2 NAME		Flames Flames
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY-ST-ZIP		
14. I do hereby	certify that the information supplied	d with this filing is voluntarily fur	nished and does not qualify	y for the exemption stated in Section 119.0	7(3)(k), 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:

305-255-8991 Daytina Phone #