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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H35205

(4)

MARILYN'S WORLD, INC. Principal Place of Business Mailing Address 4630 N. UNIVERSITY DRIVE 4630 N. LINIVERSITY DRIVE LAUDERHILL FL 33351 LAUDERHILL FL 33351-5753 Sa. Date of Last Report 3. Date Incorporated or Qualified 12/26/1984 02/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2481209 Not Applicable 21 Suite, Apt #, etc Suite, Apt. #, etc. **\$8.75** Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KENT, MARILYN 604 N.W. 106TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 63 R4 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DP DELETE Change Addition 1.1 TITLE TITLE KENT, MARILYN NAME 1.2 NAME 604 N.W. 106TH AVE. STREET ADDRESS 1.3 STREET ADDRESS PLANTATION FL 1,4 CITY-ST-ZIP CITY-ST-ZIP ST DELETE Change Addition TITLE 2.1 TELE KENT, ALVIN H. NAME 22 NAME 604 N.W. 106TH AVE. 2.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 2.4 CITY-ST-ZIP CITY - ST - ZIP DFLETE 3.1 TITLE Change ☐ Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIF DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE 5.1 TITLE Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP DELETE ☐ Addition 6.1 TITLE TITLE 6.2 NAME NAME

6.4 CITY-ST-ZIP 14. If 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 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 12 1997 8:00am

Secretary of State

(96/6)

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