

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H61205 (1)**
1. Corporation Name
DI MARCO & DI MARCO, INC.



Principal Place of Business Mailing Address
**7163 ST. ANDREWS RD.
LAKE WORTH FL 33467**

2. Principal Place of Business
21 22 23 24
2a. Mailing Address
26 27 28 29 30
1509 North Military Tr
W. Palm Beach, Fl.
33409 USA.

3. Date Incorporated or Qualified **06/10/1985**
3a. Date of Last Report **02/08/1995**
4. FEI Number **59-2548118**
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
**DI MARCO DE MARQUEZ, ELENA
7163 ST. ANDREWS RD.
LAKE WORTH FL 33467**

10. Name and Address of New Registered Agent
81 Name **Charles Charriez.**
82 Street Address (P.O. Box Number is Not Acceptable)
1509 N. Military Tr.
83
84 City **W. Palm Beach** FL 85 Zip Code **33409.**

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 obligation for 607.0505, Florida Statutes.

SIGNATURE **CHARLES CHARRIEZ** *Charles Charriez* 01-15-96.

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	DIMARCO, CARMEN J.	
STREET ADDRESS	CALLE 65A #21A-43 SECTOR	
CITY-ST-ZIP	MARACAIBO, VENEZUELA	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	MARQUEZ-DIMARCO, ELENA R	
STREET ADDRESS	7163 ST. ANDREWS RD.	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DIMARCO, JENNY M.	
STREET ADDRESS	CALLE 65A #21A-43 SECTOR	
CITY-ST-ZIP	MARACAIBO, VENEZUELA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DIMARCO, FRANCESCO J.	
STREET ADDRESS	CALLE 65A #21A-43 SECTOR	
CITY-ST-ZIP	MARACAIBO, VENEZUELA	
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. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	
14. CITY-ST-ZIP	
2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	
23. STREET ADDRESS	
24. CITY-ST-ZIP	
3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME	
33. STREET ADDRESS	
34. CITY-ST-ZIP	
4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME	
43. STREET ADDRESS	
44. CITY-ST-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME	
53. STREET ADDRESS	
54. CITY-ST-ZIP	
6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	
63. STREET ADDRESS	
64. CITY-ST-ZIP	

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5/1/96

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)(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 affidavit.

SIGNATURE: **Elena Di Marco Marquez**
SECRETARY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/96

CR2E034 (12/95)