

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H78737**

(4)

1. Corporation Name

MARKER MANAGEMENT CORP.

Principal Place of Business

**4001 N. OCEAN BLVD. 802
BOCA RATON FL 33431**

Mailing Address

**4001 N. OCEAN BLVD. 802
BOCA RATON FL 33431**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**KAGAN, HERMAN
4001 N. OCEAN BLVD. 802
BOCA RATON FL 33431**

3. Date Incorporated or Qualified

10/03/1985

3a. Date of Last Report

02/06/1995

4. FEI Number

59-2597073

Applied For
Not Applicable

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

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 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

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

**PD
KAGAN, HERMAN
4001 NORTH OCEAN BLVD
BOCA RATON FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

☐ Change ☐ Addition

2. TITLE

2. NAME

2. STREET ADDRESS

2. CITY-STATE-ZIP

☐ Change ☐ Addition

3. TITLE

3. NAME

3. STREET ADDRESS

3. CITY-STATE-ZIP

☐ Change ☐ Addition

4. TITLE

4. NAME

4. STREET ADDRESS

4. CITY-STATE-ZIP

☐ Change ☐ Addition

5. TITLE

5. NAME

5. STREET ADDRESS

5. CITY-STATE-ZIP

☐ Change ☐ Addition

6. TITLE

6. NAME

6. STREET ADDRESS

6. CITY-STATE-ZIP

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 supplementary 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 addendum with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HERMAN KAGAN

3/28/96

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CR2E034 (12/95)