

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

CORPORATION  
ANNUAL REPORT  
**1995**



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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 APR 13 PM 2:51

**DOCUMENT # J33748 (1)**

1. Corporation Name

**MARMAN INVESTMENT CO., INC.**

Principal Place of Business

C/O M & W AGENTS, INC.  
9100 S DADELAND BLVD PHH  
MIAMI FL 33156

Mailing Address

23434 BARLAKE DRIVE  
9100 S DADELAND BLVD PHH  
BOCA RATON FL 33433-7391  
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**09/18/1986**

3a. Date of Last Report

**05/01/1994**

4. FEI Number

**59-2721746**

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

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

9. Name and Address of Current Registered Agent

**NACHEMAN, ABE**  
**23434 BARLAKE DRIVE**  
**9100 S DADELAND BLVD PHH**  
**BOCA RATON FL 33433**

10. Name and Address of New Registered Agent

B1. Name

B2. Street Address (P.O. Box Number is Not Acceptable)

B3.

B4. City

**FL**

B5. 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 of agent.

(NOTE: Registered Agent signature required when row 13 is used)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **PD**  
NAME: **NACHEMAN, ABE**  
STREET ADDRESS: **23434 BARLAKE DRIVE**  
CITY, ST, ZIP: **BOCA RATON FL**

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY, ST, ZIP

TITLE: **SD**  
NAME: **NACHEMAN, LILLIAN**  
STREET ADDRESS: **23434 BARLAKE DRIVE**  
CITY, ST, ZIP: **BOCA RATON FL**

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY, ST, ZIP

TITLE: **AS**  
NAME: **TESCHER, DONALD R.**  
STREET ADDRESS: **9100 S DADELAND BVD PHH**  
CITY, ST, ZIP: **MIAMI FL**

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY, ST, ZIP

TITLE:  
NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY, ST, ZIP

TITLE:  
NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY, ST, ZIP

TITLE:  
NAME:  
STREET ADDRESS:  
CITY, ST, ZIP:

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY, ST, 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 110.07(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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address:

SIGNATURE: **MR. ABE NACHEMAN**  
**23434 BARLAKE DR**  
**BOCA RATON FL 33433**

*Abe Nacheman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/10/95** **407-488-0897**