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PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # J33748

(1)

1. Corporation Name

MARMAN INVESTMENT CO., INC.

Principal Place of Business

Mailing Address

C/O M & W AGENTS, INC.
9100 S DADELAND BLVD PH4
MIAMI FL 33156

23434 BARLAKE DRIVE
9100 S DADELAND BLVD PH4
BOCA RATON FL 33433-7391
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/18/1986

4. FEI Number

59-2721746

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 5500 NW 69 AVENUE

Suite, Apt. #, etc.

22 APT. 263

City & State

23 LAUDERHILL FL

Zip

24 33319

Country

25 USA

2a. Mailing Address

26 5500 NW 69 AVENUE

Suite, Apt. #, etc.

27 APT. 263

City & State

28 LAUDERHILL FL

Zip

29 33319

Country

30 USA

9. Name and Address of Current Registered Agent

NACHEMAN, ABE
5500 N.W. 69TH AVE., APT 263
LAUDERHILL FL 33319

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 607.0502 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 consulting)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME NACHEMAN, ABE
STREET ADDRESS 5500 N.W. 69TH AVE. APT 263
CITY - ST - ZIP LAUDERHILL FL

TITLE SD ☒ DELETE

NAME NACHEMAN, LILLIAN
STREET ADDRESS 5500 N.W. 69TH AVE. APT 263
CITY - ST - ZIP LAUDERHILL FL

TITLE AS ☐ DELETE

NAME TESCHER, DONALD R.
STREET ADDRESS 9100 S DADELAND BVD PH-1
CITY - ST - ZIP MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSTD ☒ Change ☐ Addition

1.2 NAME NACHEMAN, ABE
1.3 STREET ADDRESS 5500 NW 69 AVE. APT 263
1.4 CITY - ST - ZIP LAUDERHILL FL 33319

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME AS
3.3 STREET ADDRESS TESCHER, DONALD R.
3.4 CITY - ST - ZIP 2101 CORPORATE BLVD. STE 107
BOCA RATON FL 33431

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME D
4.3 STREET ADDRESS MARGOLIN, ROBERT
4.4 CITY - ST - ZIP 5500 NW 69 AVE. APT 263
LAUDERHILL FL 33319

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Abraham Nacheman*

ABE NACHEMAN, Pres./

4/23/99

(954) 741-0241

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secy/Treas

Date

Daytime Phone #

0290264