FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J56294

ALADINA MARKETING, INC.

(8)

FILED Apr 16 1997 8:00am Secretary of State



976 NE 56TH : SUITE \$509		Mailing Address 376 NE 56TH ST SUITE \$509			
MIAMI FL 33137 US		MIAMI FL 33137-2538 US		3. Date Incorporated or Qualified 01/29/1987	3a. Date of Last Report 04/25/1996
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number 65-0027847	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	7φ 29	Country 30	8. This corporation has liability for inta Florida Statutes XY	es 🗌 No
ARE	 Name and Address of Curre NA, MAXIMILIAN L. 	nt Registered Agent	81 Name	10. Name and Address of New Regis	tered Agent
600	NORTHEAST 36TH STREET TE 509 CHARTER CLUB		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
	MI FL 33137		83		
			84 City		FL 85 Zip Code
11. Pursuant office or i agent. I a SIGNATURE	to the provisions of Soctions 607.0M registered agent, or both, in the State im familiar with, and accept the oblig	jations of, Section 607.0505,	dutes, the above-named corps authorized by the corpora Florida Statutes. Off: Registered Agent's gnature regis	poration submits this statement for the purp tion's board of directors. I hereby accept the	ose of changing its registered the appointment as registered
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	ARENA, MAXIMILIAN L.		1.2 NAME		
STREET ADDRESS	600 NE 36TH STREET MIAMI FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIXMI FC	DELETE	1.4 CITY - \$1 - ZIP 2 1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		L) DELETE	3.1 THILE		Change
NAME OTOGET ADDRESS			3.2 NAME		
STREET ADDRESS CITY - ST - ZIP			3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 Tills E		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY- ST- ZIP		
TITLE		☐ DELFTE	5 1 HILF		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	<u></u>	DELETE	5.4 CHY-S1-7IP 6.1 TITLE		Change Addition
NAME		and Millie	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
City-St-ZIP			6.4 CHY-SI-ZIP		

14. 1 do hereby certify that the information supplied with this filing cless 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 eath; 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.

Maximilian I