FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** K25835 (5) 1. Corporation Name MARCIN, INC. Principal Place of Business Mailing Address 2000 SOUTH DIXIE HIGHWAY 2000 SOUTH DIXIE HIGHWAY SUITE 200 SUITE 200 **MIAMI FL 33133** MIAMI FL 33133 3. Date Incorporated or Qualified 3a. Date of Last Report 06/09/1988 08/25/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0214637 Not Applicable Suite, Apt. #, etc Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 \Box Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CORIROSSI, ROBERT G Street Address (P.O. Box Number is Not Acceptable) 82 2000 S DIXIE HWY SUITE 200 83 **MIAMI FL 33133** 84 City 85 Zip Code 11. Fursuant 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 agent, or both, in the State of Florida Statch change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am SIGNATURE Styriature, typed or pricted have of rejectered agent and but if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1 1 THILE ☐ Change ☐ Addition ZILBER, CINDI 1.2 NAME SI REFF ADDRESS 2000 SO. DIXIE HIGWAY #200 1.3 STREET ADDRESS MIAMI FL 33133 CITY-ST 7# 1.4 CITY - ST - ZIP **VPS** DELETE 2 1 TITLE Change Addition ZILBER, MARTIN 2.2 NAME 2000 SO. DIXIE HIGHWAY #200 STREET ADDRESS 23 STREET ADDRESS CHY-ST-20-**MIAMI FL 33133** 2 4 CITY - ST - ZIP DELETE 3 1 TITLE [] Change ☐ Addition 3 2 NAME STREET ADDRESS. 3.3 STREET ADDRESS 3 4 C(TY - ST - Z(P DELETE 4.1 TITLE Change ☐ Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS C/TY-ST-ZP 44 CHTY-ST-ZIP DELETE 5 1 TITLE Change Addition 5.2 NAME STREET ACCORES 5 3 STREET ADDRESS

14. I do hereby cortify that the information supplied with this filing is voluntarily turnished 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 carbon that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name an attachment with an address.

54 CITY - ST - ZIP

6 3 STREET ADDRESS

64 CITY - ST-ZIP

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