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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K51280

(1)

RESIDENTIAL MARINER COMPANY

Apr 07 1997 8:00am
Secretary of State

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Principal Plac	ce of Business	Mailing Ad	dress				T TOWNS WITH DESIGNATION STANK INDUSTRIANS WORLD	IIIII BIBII DI	165 MINST MINIT	1 8191) (9 81
1881 NE 26TI	h street		TH STREET							
SUITE 212A	DALE FL 33305	SUITE 212A	i Rdale fl 333	06.1416						
US	ALE PL 33305	US	TORLE PL 333	00-1410			3. Date Incorporated or Qualified	3a. Dat	e of Last F	Report
				_			12/12/1988		1/1996	
2. Principal	Place of Business	2a. Mailing	Address				4. FEI Number			pplied For
21		26					65-0103033			ot Applicable
Suite, Apt	t. #, etc.	\vdash	pt. #, etc.				5. Certificate of Status Desired			Additional equired
City & Sta	310	27 City & S	State				6. Election Campaign Financing			May Be
23		28	J.L., C				Trust Fund Contribution	П		to Fees
Zip	Country	Zip		Count	ry		8. This corporation has liability for in			
24	25	29		30	•		Florida Statutes	Yes Z	No	. 100.002
	9. Name and Address of Curi		jent	1221			10. Name and Address of New Reg			
MA	ARTINI, GREGORY T.			6	1	Name				
	55 LEJEUNE ROAD				2	Street Adds	ess (P.O. Box Number is Not Acceptable	e)		
	ORAL GABLES FL			*	۱ ٔ	Sheet Work	ess (F.O. Box Humber is that Accordan	,		
				8	3					
				-	4				1221 7:-	0-3-
				16	4	City		FŁ	85 Zip	Code
11. Pursuan	to the provisions of Sections 607.0	502 and 607.1508,	Florida Statu	ites, the abo	we Ne	named corp	poration submits this statement for the p	Ironse of	changing i	its registered
L office or	registered agent, or txith, in the Sta am familiar with, and accept the ob-	ate of Florida, Such	change was	authorized	ħν	the corporati	ion's board of directors. I hereby accep	t the appo	intment as	registered
		ingations or, Section	1001.0003,1	ionda statu	.00	•				
SIGNATURE	Signarius, typed or printed name of registered	agent and title if applicable	e (NO	TE: Registered A	\aer	nt signature require	red when reinstating)	DATE		
12.		AND DIRECTORS		13.		 	ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
TIFLE	PST		DELETE	1.1 T(T).	E				Change	Addition
NAME	MARTINI, ERIC T.			1,2 NAM	IE.					
STREET ADDRESS	4004 NE 00TH OT 4040			1.3 STR	EET A	ADORESS				,
C/TY-ST-ZIP	FORT LAUDERDALE FL			1.4 CiTY	- \$1	T-ZIP				
TITLE			DELETE	2.1 TITL					Change	Addition
NAME				2.2 NAM	1E					
STREET ADDRESS	;			2.3 STRI	EET A	ADDRESS				
CiTY+ST+ZiP				2. 4 CIT	Y-\$`	ST-ZIP	2.1			
TITLE			DELETE	3.1 TiTL					Change	Addition
NAME				3.2 NAM	ΙE					
STREET ACCURESS	5			3.3 STRI	EET 1	ADDRESS				
CITY - ST - 7IP				3.4. CIT	Y~S`	37 - ZIP				
THLE			DELETE	4.1 TITL					Change	■ Addition
NAMÉ				4. 2 NA	ME					
STREET ADDRESS	, [ADDRESS				
CHY-SI-ZIP				4.4 City		· I	•			
TITLE			DELETE	5.1 TIFL					Change	Addition
NAME			-	5.2 NAM					_	
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				5.4 CITY						
TILLE			DELETE	6.1 TITU		, =0			Change	Addition
NAME				6.2 NAM				,		
	.					ADDRESS				
STREET ADDRESS										
14. Ldo hed	i obv certify that the information succe	olied with this filing	does not qua	6.4 CITY			d in Section 119.07(3)(i), Florida Statutes	s. I further	certify tha	t the

rao nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0/(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.

ERICHT MARTINI-PRES.