**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90150 046 \*\*\*158.75

DOCUI	MENT # K62106	5					
MARALON, INC.							
Principal Plac	e of Business	Mailing Address				i dedik bibli bibli	A:B() Albit (AB)
2008 NW 22ND		2008 NW 22ND STREET					
MIAMI FL 33142 MIAMI FL 33142					DO NOT WRITE IN TH	IS SDACE	
					3. Date Incorporated or Qualifed	IS SPACE	
					01/31/1989		
2. Princinal P	lace of Business	2a. Mailing Address			4. FEI Number	T A	prilied For
21		26			65-0111236	<u> </u>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		A iditional
22		27			5. Certificate of Status Desired	Fee Re	equired
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Courtry	Zip	Country		This corporation owes the current year     Persor al Property Tax.	ntangible	IZNo
24	9. Name and Address of Curre		<u> </u>		10. Name and Address of New Registers		
	- Hame and Address of dutie		81	Name			
	NSO. MANUEL, JR.		82	Strant Ar -	ress (P.O. Box Number is Not Acceptable)		
2008 NW 22ND ST.			02	Sileer Actu	ress (F.O. DOX Mulliber is Not Acceptable)		
MIAMI FL 33142			83				
			84	City		. 85 Zip	Code
I				i	poration submits this statement for the purpose on's board of cirectors. I hereby accept the app		
SIGNATURE	Signature, typed or printed name of registered age		egistered Agen	t signature require	ADDITIONS/CHANGES TO OFFICERS	ND DIRECTO	OF S IN 12
12.	DP OFFICERS AI	NE DIRECTORS ☐ DELETE	1.1 TITLE			Change	Addition
NAME	ALONSO, MANUEL, JR.		1.2 NAME		•	G.	
STREET ADDRE SS	ACCO ANAL COLID ATTECT		13 STREET ADDRESS			20	İ
CITY-ST-ZIP	MIAMI FL 33142		1.4 CITY-ST-ZIP			P	
TITLE	DT	☐ DELETE	2.1 TITLE			□ Change	Addition
NAME	BLANCO, ENRIQUE		2.2 NAME			7	
STREET ADDRESS			2.3 STREET	ADDRESS		1	
CITY-ST-ZIP	MIAMI FL 33142		2.4 CITY-ST-ZIP				
TITLE	VP	☐ DELETE	31 TITLE			Change	☐ Addition
NAME	HERNANDEZ, L. ANGEL		3.2 NAME				
STREET ADDRESS	LOOD IVII LLIND OTTILLI			ADDRESS			ı
TITLE	MIAMI FL 33142		3.4 CITY-S 4.1 TITLE	11-ZIP		Change	Addition
NAME	VP Orlando, Napoles G.		4.2 NAME			3-	_
STREET ADDRES S	l		4.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33142		4.4 CITY-ST-ZIP				
TITLE	1718 MYTT   1 W   1 ML	☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			54 CITY-S	r-ZIP		<del></del>	
TITLE		DELETE	61 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ľ			:
CITY OF TIP			6.4 CITY-S	T-ZIP			i

14. I hereby certify that the information indicate 3 on this annual report of 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 charged, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATU RE AND TYPED OR PRINTED NAME OF