

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

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May 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L16800 (9)
1. Corporation Name
MARBLEIDGE, INC.



Principal Place of Business
~~1800 4TH AVENUE NORTH~~
1800 4TH AVENUE NORTH
LAKE WORTH FL 33461
US

Mailing Address
1800 4TH AVENUE N
LAKE WORTH FL 33461-3856
US

3. Date Incorporated or Qualified 09/15/1989
3a. Date of Last Report 04/30/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	59-2968203	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25	30		

9. Name and Address of Current Registered Agent

JASIEL, JON
1800 4TH AVENUE
LAKE WORTH FL 33461

10. Name and Address of New Registered Agent

81 Name FRIEDMAN, JONATHAN
82 Street Address (P.O. Box Number is Not Acceptable)
1800 4TH AVENUE NORTH
83
84 City LAKE WORTH FL 85 Zip Code 33461

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] JONATHAN FRIEDMAN

4/28/97

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VIVERTO, GERARD	1.2 NAME	
STREET ADDRESS	1800 4TH AVENUE N	1.3 STREET ADDRESS	107 YACHT CLUB WAY, APT. 110
CITY-ST-ZIP	LAKE WORTH FL	1.4 CITY-ST-ZIP	Hypoluxo, FL 33462
TITLE	C	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DWORKIN, SIDNEY	2.2 NAME	
STREET ADDRESS	2800 S. OCEAN BLVD APT 12F	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JASIEL, JON	3.2 NAME	FRIEDMAN, JONATHAN
STREET ADDRESS	6151 SERNE RUN	3.3 STREET ADDRESS	1824 LYNTON CIRCLE
CITY-ST-ZIP	LAKE WORTH FL	3.4 CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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

[Signature] JONATHAN FRIEDMAN

CR2E034 (9/96)