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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 26 1997 8:00am

Secretary of State

Á TÁBÁTRAT MÁR TÍVÁR MÁJÁB MÁTÁR TRAVE DEGI DEGIS BEBU BEBU BEBU BEGU ATARE OLDÁF DEGÁ FÁRRA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

L38684

(1)

MARK MANAGEMENT INVESTMENT CORPORATION

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Principal Place of Business Mailing Address						1	L 200110011 000 31101 40100 01401 1814	f miðit miðst áthi	is model ments mike	t Billit ilili
980 MONTGON ALTAMONTE S	MERY RD #3 Springs fl 32714	980 MONTGOMERY RD #3 ALTAMONTE SPRINGS FL 32714-7431								
					;	r	3. Date Incorporated or Qualific	ed 3a. [Date of Last R	eport
							12/20/1989	0/	4/09/1996	
2. Principai Pi	lace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number	***************************************		plied For
21		26					59-2982749			ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			- 1	5. Certificate of Status Desired		•	Additional	
City & State	Α	City & State							equired	
23	G	28]	Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	•	
Zip	Country	Zip	Cou	ntry			8. This corporation has liability			
24	25	29	30	·		1	Florida Statutes		No	. 105.002,
····	9. Name and Address of Curre	nt Registered Agent	4				10. Name and Address of New	Registered	Agent	
KANAGA, MERIDYTHE					Name					
	MONTGOMERY RD.		82 Street Add			Address	s (P.O. Box Number is Not Acce	otable)		
	TE 3									
ALT	AMONTE SPRINGS FL 32714			83		. "				
				84	City				85 Zip	Code
								FL	_	
office or ri agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblig	e of Florida. Such change was .	authorize	d by	the car	corpora- poration	ation submits this statement for the board of directors. I hereby ac	ne purpose i xcept the ap	of changing it pointment as	is registered registered
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOT	TE: Registered	Ape	nt signaturi	a required v	when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.				ADDITIONS/CHANGES TO O	FICERS AN	ID DIRECTOR	RS IN 12
TITLE	DP	DELETE	1.1 Ti	TLE					Change	Addition
NAME	KANAGA, RICK		1.2 N/	ME						
STREET ADDRESS	1176 BRANTLEY ESTATES D	rive	1.3 \$1	REET	ADDRESS	,				
CITY - ST - ZIP	ALTAMONTE SPRINGS FL		1,4 Ci	TY-S	T-ZIP					
TITLE	DST	DELETE	2.1 Ti	TLE					Change	Addition
NAME	KANAGA, MERIDYTHE		2.2 N/	ME					•	
STREET ADDRESS	1176 BRANTLEY ESTATES D	RIVE	2.3 S1	REET	ADDRESS					
C(TY-S)-7IP	ALTAMONTE SPRINGS FL	D or fre			ST-ZIP					The desired and
TITLE	D	☐ DELETE	3.1 TI			1		,	Change	Addition
NAME	KANAGA, RYAN		3.2 N/			21	s. Edgemon	Aus	enue	
STREET ADDRESS	71 S. EDGEMOND DRIVE				ADDRESS	11		,, ,	D . 4-1 -	
CITY-ST-ZIP TITLE	WINTER SPRINGS FL	DELETE	3.4. C 4.1 Tr		ST-ZIP	 	······································		☐ Change	Addition
NAME		C DECEM	4. 2 N			ľ	,		ondinge	L Addition
STREET ADDRESS					ADDRESS					
CHTY-ST-ZIP			4.4 CI							
TITLE		☐ DELETE	5.1 Tr		1.71		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME			5.2 N/							****
STREET ADDRESS					ADDRESS					
CITY-S1-7IP			5.4 CI							
TITLE		DELETE	6.1 TI		<u> </u>	1			Change	Addition
NAME			6.2 N/	ME					•	
STREET ADDRESS		*			ADDRESS					
DITY-ST-ZIP			6.4 CI							
14. I do heret	by certify that the information suppli	ed with this filing does not qual	ify for the	ехе	mption s	stated in	Section 119.07(3)(i), Florida Sta	tutes. I furth	er certify that	the
l ani an o	or indicated on this annual report or fficer or director of the corporation of	supplemental annual report is or the receiver or trustee empoy	wered to e	XOCL	ute this	report a	y signature snall have the same is required by Chapter 607, Flori	egai errecti da Statutes;	as ii made un and that my i	ider bain; inat name