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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90126 019 ***150.00

2-13-99 561 736 3038

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **L46357** 1. Corporation Name

MARLIN, INC.

SIGNATURE:

,						
Principal Place of Business	Mailing Address	***		-	BIEN GIBN BIBN G	(81) BIBIL (88)
MARLIN, INC	MARLIN. INC			1		
12 SABAL ISLAND DR 12 SABAL ISLAND DR				DO NOT WOLK IN THE	C CDACE	
OCEAN RIDGE FL 33435 US US				DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed	SSPACE	
US	US			01/25/1990		
2. Principal Place of Business	2a. Mailing Address		·	4, FEI Number	- An	plied For
⊢				65-0176631		t Applicable
Suite, Apt. #, etc.	Suite, Apt#, etc.				\$8.75	
}	27			5. Certificate of Status Desired	Fee Re	
City & State	City & State			6. Election Campaign Financing	\$5.00	May Re
23	28			Trust Fund Contribution	Added t	
Zip Country	Zip	Country	7	8. This corporation owes the current year Ir	ntangible	
24 25	29	0		Personal Property Tax.	Yes	□No
9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
		81	Name			
JOH, ERIK EDWARD		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
4600 N OCEAN BLVD			Oll dot Adding	os (10. dox 11am2d) to 11017 to optionally		
BOYNTON BEACH FL 33435		83				
		84	City		85 Zip (
		04	City	FI	_ 65 215 (Jode
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State cagent. I am familiar with, and accept the obligations.	f Florida. Such change was auth	norized by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appoint	f changing its pintment as req	registered gistered
SIGNATURE						
Signature, typed or printed name of registered agent		 -	nt signature required		NO DIRECTO	DC IN 12
12. OFFICERS ANI	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition
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00=411 ND05 EI		1.3311400	I ADURESS			
 		4.4.0(T)/ 0	T 710			
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NAME .	☐ DELETE	2.1 TITLE 2.2 NAME			Change	Addition
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14. I 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, with all other like empowered.