## 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 # M43252

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MARCO CASTLE INVESTMENTS, INC.

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Principal Plac	ce of Business	Mailing												
	AVE., EAST, STE 1010 TARIO M4T 283		22 ST. CLAIR AVE., EAST, STE 1010 TORONTO, ONTARIO M4T 283 CANADA											
								3. Date Incorpo 12/15/1986	orated or Qualified		ate of Last I 19/1996	Report		
	Place of Business	h	ing Address					4. FEI Number	A	pplied For				
21	# al.	26						98-00866	4	ot Applicable				
Suite, Apt	#, etc	27	e, Apt. #, etc.					5. Certificate of	Status Desired		· · · · · -	Additional equired		
City & Stat	le	City	& State					Election Campaign Financing \$5.00 May Be						
23		28		.,				Trust Fund C	ontribution			to Fees		
Zip	Country	Zip			untry	1			tion has liability fo <u>r i</u>			s. 199.032,		
24	25  9. Name and Address of Cu	29	Anni	30	т			Florida Statu		Yes [				
OT (		irrent negistered	Agent	<del></del>	81	Na	mo	10. Name and A	ddress of New Re	jistered .	Agent			
	CORPORATION SYSTEM				"	ING	1110							
	) south pine island road Ntation FL 33324	J		•	82	Str	eet Addre	ss (P.O. Box Num	oer is Not Acceptab	le)				
r LA	MINION I E 00024													
					84	Cit					<b>85</b> Zip	Code		
11. Pursuant office or i	to the provisions of Sections 607 registered agent, or both, in the S	.0502 and 607.15 late of Florida, Sc	08, Florida Statut uch change was	les, the a authorize	bove of by	e-nan / the	ned corpo corporatio	ration submits this	statement for the p tors. I hereby accep	FL urpose of t the app	. 1 "   "			
agent. Fa	em familiar with, and accept the o	bligations of, Sec	tion 607.0505, Fi	orida Sta	tutes	<b>S</b>						_		
SIGNATURE	Signature, typed or printed name of registere	d agent and title if appli	cable. (NOT	E: Registere	d Age	ent sign	ature required	d when reinstating)		DATE		<del></del>		
12.		AND DIRECTOR	S	13.			······································	ADDITIONS/C	HANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12		
TITLE	PD		DELETE	1.1 7	TLE					<del></del>	Change	Addition		
NAME	DIAMOND, A. E.			12N	AME									
STREET ADDRESS	1166 BAY ST. #2204			1.3 \$	TREET	ADORE	:ss							
CITY-ST-ZIP	TORONTO, ONT., CANADA			140	ITY-S	T-21P								
TITLE	VD		DELETE	2.1 T	ITLE						Change	Addition		
NAME	DIAMOND, MICHAEL			2.2 N	AME		-							
STREET ADDRESS	75 STRATHEARNE RD.			2.3 \$	TREET	ADDR	ss							
CITY-ST-71P	TORONTO, ONT., CANADA			2.40	ITY-S	ST-ZIP								
TOTLE	VSTD		DELETE	3.1 T	ITLE						Change	Addition		
NAME	DIAMOND, CAREY J.			32 N	AME									
STREET AODRESS	35 MILBANK AVE.			33 S	TREET	ADDRI	ss							
CITY-ST-7IP	TORONTO, ONT CAN			34.0	HTY-S	ST-ZIP								
TITLE			DELETE	41 T	TLE						Change	Addition		
NAME				4 2 1	IAME		ļ					•		
STREET ADDRESS				4.3 S	TREET	ADDR	SS							
CITY-ST-ZIP				440	ITY-S	T-ZIP			· · · · · · · · · · · · · · · · · · ·					
TITLF			L] DELETE	51T	TLE		-				Change	☐ Addition		
NAME				52 N	AME	1. 1		•						
STREET ADDRESS				538	TREET	ADDRI	ss							
CITY-ST-7/P					ITY-S	T-ZIP								
TOTLE			☐ DELETE	61T			ł				Change	Addition		
NAME				62 N	AME									
STREET ADDRESS				635	TAEET	ADDAI	ss				•			
CITY-ST-ZIP				640	ITY-S	T-ZIP	<u> </u>					**** * * * * * * * * * * * * * * * * *		

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 LE SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OF DIRECTOR