

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **M76908** (6)

1. Corporation Name

MARLI INDUSTRIES, INC.

Principal Place of Business

**7166 N.W. 12 STREET
MIAMI FL 33126**

Mailing Address

**7166 N.W. 12 STREET
MIAMI FL 33126**

FILED

95 JUL 19 AM 10:50

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
04/18/1988

3a. Date of Last Report
05/01/1994

4. FEI Number
65-0044428

Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 **7400 NW 7 STREET**

26 **7400 NW 7 STREET**

Suite, Apt. #, etc.

22 **UNIT 109**

Suite, Apt. #, etc.

27 **UNIT 109**

City & State

23 **MIAMI, FL**

City & State

28 **MIAMI, FL**

Zip

24 **33126**

Country

25 **USA**

Zip

29 **33126**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**LIGNAROLO, MARIO
7166 NW 12TH ST.
MIAMI FL 33126**

10. Name and Address of New Registered Agent

81 Name **LANCE JOSEPH, ESQ., P.A.**

82 Street Address (P.O. Box Number is Not Acceptable)

6950 N. KENDALL DRIVE

83

84 City

MIAMI

FL

85

Zip Code
33156

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

LANCE JOSEPH ESQ. P.A.

6/29/95

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	LIGNAROLO, MARIO
STREET ADDRESS	7166 NW 12TH ST.
CITY - ST - ZIP	MIAMI FL 33126
TITLE	DVP
NAME	ROBAYNA, GUSTAVO C.
STREET ADDRESS	7166 NW 12TH ST.
CITY - ST - ZIP	MIAMI FL 33126
TITLE	DTS
NAME	LIGNAROLO, FINI
STREET ADDRESS	7166 NW 12TH ST.
CITY - ST - ZIP	MIAMI FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	7400 NW 7 ST. UNIT 109
1.4 CITY - ST - ZIP	MIAMI, FL 33126
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	7400 NW 7 ST UNIT 109
2.4 CITY - ST - ZIP	MIAMI FL 33126
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	7400 NW 7 ST. UNIT 109
3.4 CITY - ST - ZIP	MIAMI FL 33126
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GUSTAVO C. ROBAYNA, VICE PRES.

6-28-95

206-265-0900

(Date)

(Telephone Number)