

FILED

PROFIT
CORPORATION
ANNUAL REPORT -
1997



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

MARIVAN CORPORATION

3. Date Incorporated or Qualified 2/26/93	3a. Date of Last Report 12/27/96
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21	Principal Place of Business		28	Mailing Address	
21			28		
22	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.	
22			27		
23	City & State		28	City & State	
23			28		
24	Zip	Country	29	Zip	Country
24	25		29	30	

4. FEI Number	Applied For
59-327377	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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81	Name	PETER TATTERSALL
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82 Street Address (P.O. Box Number is Not Acceptable)
333 N. FERN CREEK AVE

63

84	City	ORLANDO	FL	85	Zip Code	32803
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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 for the corporation and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

SECRET

NOTE: Figures in parentheses are percentages of total sample.

227

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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☐ DELETE	DATE	☐ Change	☐ Addition
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101 FLIGHT, MARLETTE	12 NAME
333 N. FERN CREEK AVE	13 STREET ADDRESS
ORLANDO FL 32803	14 CITY-STATE

DAN DEPUTTE, DANNY 333 N. FRANK CREEK AVE	☐ DELETE 21701E 00 NAME	☐ Charge ☐ Addition
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101-101-101-101	ORLANDO, FL 32803	24 CITY-STATE	Change	Assign
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100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553
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 ☐ Change
 ☐ Action

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4 B STREET ADDRESS
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97

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44-111-1000000	52 STREET ADDRESSES	5
44-111-1000000	54 CITY - ST - ZIP	

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-05/23/97--01004--030

14. I hereby certify that the information on page 1 of this filing does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information on page 1 of this filing is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am duly qualified to prepare and file this document; and that I am not a disbarred attorney or a person who is suspended from the practice of law by Chapter 607, Florida Statutes; and that my name is on the Florida Bar's list of active members.

SIGNATURE:

STANDARD AND TYPE INFORMATION OF SPARK PLUGS OF DISCHARGE

4/29/97

PRESIDENT