

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000038955 (9)

1. Corporation Name

MARCO EQUIPMENT, INC.



Principal Place of Business

13950 SW 14TH ST
DAVIE FL 33325

Mailing Address

13950 SW 14TH ST
DAVIE FL 33325

3. Date Incorporated or Qualified
06/02/1993

3a. Date of Last Report
11/01/1995

2. Principal Place of Business

21 5850 ORANGE DRIVE

2a. Mailing Address

26 5850 ORANGE DRIVE

Suite, Apt. #, etc.

22 SUITE B

Suite, Apt. #, etc.

27 SUITE B

City & State

23 DAVIE FLORIDA

City & State

28 DAVIE FLORIDA

Zip

24 33314

Country

25 BROWARD

Zip

29 33314

Country

30 BROWARD

4. FEI Number

65-0485302

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

9. Name and Address of Current Registered Agent

CATINELLA, FRANCA
13950 SW 14TH ST
DAVIE FL 33325

10. Name and Address of New Registered Agent

81 Name

CATINELLA FRANCA

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

8227 SAN CARLOS CIRCLE

83

84 City

TAMARAC

FL

85 Zip Code

33321

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

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

Frances Catinella
(NOTE: Registered Agent signature required when reinstating)

4-26-96

DATE

12. OFFICERS AND DIRECTORS

TITLE DPT ☐ DELETE
NAME CATINELLA, FRANCA
STREET ADDRESS 13950 SW 14TH ST
CITY-ST-ZIP DAVIE FL 33325

TITLE SD ☐ DELETE
NAME MAROANDOLA, JACQUELYN
STREET ADDRESS 13950 SW 14TH ST
CITY-ST-ZIP DAVIE FL 33325

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTD ☒ Change ☐ Addition
1.2 NAME CATINELLA FRANCA
1.3 STREET ADDRESS 8227 SAN CARLOS CIRCLE
1.4 CITY-ST-ZIP TAMARAC FL 33321

2.1 TITLE VSM ☒ Change ☐ Addition
2.2 NAME MAROANDOLA JACQUELYN
2.3 STREET ADDRESS 13950 SW 14TH STREET
2.4 CITY-ST-ZIP DAVIE FL 33325

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 900001804799
4.4 CITY-ST-ZIP 05/02/96--01014--003

5.1 TITLE ***208.75 ☐ 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 119.07(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 if changed, or on an attachment with an address.

SIGNATURE:

Jacquelyn Marandola
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACQUELYN MARANDOLA 4-26-96 954 327 9933

Date

Daytime Phone #

CR2E034 (12/95)