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

CORPORATION ANNUAL REPORT



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

1996

Parcycle Place of Business Maining Address SOUTH OCSAN PRIVE FORT PIERCE FL 34949	1. Corporation	MENT # P9300 MARTA, INC.	0078155 (7)					
Control Octon Delive Section Control Delive Fort PIERCE R. 34498 Section Control Deliver Control Deliver Control Control Deliver Control	Principal Place of Rusiness Mailing Address							
11/08/1985 56,01/1995 28 Malting Address 4. FEI Number 55-0448933 1/08 / Applied For 1/08 / Applie	601 SOUTH O	CEAN DRIVE	601 SOUTH OCEAN DRIV	E				
Suffer Apt 4, etc.						11/08/1993		
27	2. Principa! Pla 21	ce of Business	⊢ ¬					
28						5. Certificate of Status Desired		
SUMMERLIN, LARRY DELETE STIME ST	City & State		⊢ → '			1 7 7	, , ,	
SUMMERLIN, LARRY 601 SOUTH OCEAN DRIVE FORT PIERCE FL 34949 582 Street Accidess (P.O. Box Number is Not Acceptable) 583 Zep Code	Ζιρ 24	25 29 30			/ 	Florida Statutes 🔀 Yes [] N	0	
SUMMERLIN, LARRY 601 SOUTH OCEAN DRIVE FORT PIERCE FL 34949 563 564 City FL ST 20 Codo 11. Pursuant to the provisions of Sections 607,0502 and 807 1508, Florida Statutes, this above named corporation submits this statement for the purpose of changing its registered diffice 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, and accept the obligations of, Sociotion 607,0505, Priorida Statutes SIGNATURE SUMMERLIN, LARRY 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE SUMMERLIN, LARRY 305 CHAMBERLIN BLVD. 1.3 STRET ADDRESS CITY-ST-2P FORT PIERCE FL 34948 14 COT-ST-2P TITLE DELETE 3 TITLE DELETE 3 TITLE Change Addition MCALLSTER, PHYLLIS 22 NAME 33 STREET ADDRESS CITY-ST-2P FORT PIERCE FL 34982 44 COT-ST-2P TITLE DELETE 3 TITLE Change Addition Additi		9. Name and Address of Curre	nt Registered Agent	01	Maga	10. Name and Address of New Registe	red Agent	
Bot SOUTH OCEAN DRIVE FORT PIERCE FL 34949 Bay Bay Bay Bay Bay Bay Bay Ba	OL WALLED	NIN LADOV		В				
FORT PIERCE FL 34949				82	Street Addr	at Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607,0502 and 607 1508. Florida Statutes, the above-named ocrporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was sutherized by the corporation's board of directors. I hereby accept the appointment as registered agent, in an accept the obligations of Sciochion 607,0502. Piondis Statutes Significant, and accept the obligations of Sciochion 607,0502. Piondis Statutes Significant, and accept the obligations of Sciochion 607,0502. Piondis Statutes Significant, and accept the obligations of Sciochion 607,0502. Piondis Statutes Significant typed or pre-et name of registered agent and the flagohate. Note: 12. OFFICERS AND DIRECTORS 13. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. This: 12. OFFICERS AND DIRECTORS 13. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME SIMMERLIN, LARRY 395 CHANBERLAIN BLVD. 13.STREET ADDRESS SIRET ADDRESS SIRET ADDRESS SIRET ADDRESS SOR DIRECTORS IN 12 27. NAME SIRET ADDRESS SOR DIRECTORS IN 12 27. NAME SIRET ADDRESS SOR DIRECTORS IN 12 28. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. STREET ADDRESS SOR DIRECTORS IN 12 14. This: 15. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition Addition Addition Addition Addition ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition Addition Addition Addition Addition ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. This: 17. STATE ADDRESS SIRET ADDRESS				63				
The Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named occionation submits this statement for the purpose of changing its registered difficency or projected 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 registered agent on the bigations of, Sections 607.0502, Broide Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 INC. SUMMERLIN, LARRY 395 CHAMBERIAN BLVD. FORT PIERCE FL 34946 14.011'-SI-ZP MCALLISTER, PHYLLIS 509 IXORIA AVENUE FORT PIERCE FL 349482 22 NAME 33 SIREI ADDRESS 509 IXORIA AVENUE FORT PIERCE FL 34982 34 SITE ADDRESS 509 IXORIA AVENUE FORT PIERCE FL 34982 35 SIREI ADDRESS 509 IXORIA AVENUE 14 INITE 15 INITE 16 DELETE 17 INITE 18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19 Change Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 ANAME 35 SIREI ADDRESS 509 IXORIA AVENUE 14 ADDRESS 15 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19 ADDITIONS/CHANGES TO OFFICERS 10 ADDITIONS/C	1011111	Little I E 01010						
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, Porido Statutes Signature: 12.				84	City		FL 85 20 COOO	
12	11. Pursuant to or registere familiar with	o the provisions of Sections 607.050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	2 and 607.1508, Florida Statutes, ida. Such change was authorized tion 607.0505, Florida Statutes.	the above- by the corp	named corpor poration's boar	ation submits this statement for the purpose or rd of directors. I hereby accept the appointmen	f changing its registered office at as registered agent. I am	
12.	SIGNATURE _	Stood in hinart or prin ed harrie of renistered apen	nt and title if andicable (NOTE:	Registered Age	ot signature regionate	d when reinstating) DA	ть	
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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		v certify that the information supplied	with this filing is voluntarily furnish			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.

PHYLLIS MCALLISTER SIGNATURE: