## 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 # 1. Corporation Name P9400003733 (0)

MARVAN POWER, INC.

Principal Placi	e of Business	Mailing Address	Mailing Address				S CONTINUES (SEE MOST BIBLI BOILL BOILL BA	ii baili Baib	9 kiliki a <b>kada</b> akki	84 HAT 1881
7910 SW 131 MIAMI FL 3318		7910 SW 131 AVENUE MIAMI FL 33183-4263								
						3.	Date Incorporated or Qualified 01/14/1994		ate of Last R / <b>19/1996</b>	eport
2. Principal Place of Business 2s. Mailing Address							FEI Number			oplied For
21 26							65-0460345			ot Applicable
Surte, Apt. #, etc Suite, Apt. #, 22 27						5.	Certificate of Status Desired		\$8.75 / Fee Re	
City & State         City & State           23         28							Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	May Be to Fees
Ζφ <b>24</b>	Country 25	Zip 29	30 Cou	ntry		8.	This corporation has liability for Florida Statutes	intangible ] Yes [		. 199.032,
	9. Name and Address of Curren	t Registered Agent				10.	Name and Address of New Re	gistered	Agent	
RAN	MIREZ, OSEAS			81	Name					
791	0 SW 131 AVENUE MI FL 33183			82	Street Add	iress (F	O. Box Number is Not Acceptal	ole)		
ITIMA	mi 1 L 00 100			83			***************************************			
				84	City			FL	•	Code
11. Pursuant office or ragent La	to the provisions of Sections 607.050. eg-stered agent, or both, in the State m familiar with, and accopt the obliga	2 and 607.1508, Florida State of Florida. Such change was ations of, Section 607.0505, F	ites, the al authorize lorida Stat	d by	e-named corp the corporal s.	poration's I	on submits this statement for the pooling of directors. I hereby acceptions	ourpose o pt the app	changing it pointment as	is registered registered
SIGNATURE	<u></u>									
12.	Signature, typed or printed name of registered agn OFFICERS ANI	· · · · · · · · · · · · · · · · · · ·	TE: Registere	d Age	nt signature requi		n reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTOR	NS IN 12
THILE	P	DELETE	1.1 TI	TLE			ADDITIONO/OFFANGES TO OFFI	ZEI IO AIVE	Change	Addition
NAME	DEL RIO, MARIO		1.2 N							
STREET ADDRESS	7910 SW 131 AVENUE		1.3 \$1	REET	ADDRESS					
City-S1-ZiP	MIAMI FL 33183		1.4 CI	TY-S	T-21P					
TITLE	VP	DELETE	2.1 Ti	TLE					Change	Addition
NAME	RAMIREZ, OSEAS		2.2 N/	AME						
STREET ADDRESS	7910 SW 131 AVENUE		2.3 \$1	REET	ADDRESS		<b>*</b> ·	.*		Ì
CITY - ST - ZIP	MIAMI FL 33183		2.40	ITY-S	ST-ZIP					
TITLE		DELETE	3.1 TI	TLE					Change	Addition
NAME			3.2 N	AME						
STREET ADDRESS			3.3 \$1	REET	ADDRESS					-
CITY-ST-7:P		D St. CT.	_		ST-ZIP		·····			2 (42)
THILE		☐ DELETE	4.1 T)						☐ Change	☐ Addition
NAME			4. 2 N							
STREET ADDRESS					ADDRESS					
CHTY - ST - ZIF		T bourse			IT-ZIP				Chann-	Addition
TITLE		DELETE	5.1 T)						Change	Addition
NAME CTOCCY ASSOCIATES			5.2 N		ADDRESS					
STREET ADDRESS					ADDRESS					
CITY+ST-ZIP TITLE		DELETE	5.4 CI 6.1 TI		I-IIP		·		Change	Addition
		La Dictili							and comings	
NAME CERTEL ADDRESS			6.2 N		ADDRESS					
STREET ADDRESS			1		ADDRESS					

**SIGNATURE:** 

Too 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 direction 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.

**FILED** 

Apr 14 1997 8:00am

Secretary of State