

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000013394 (9)**

1. Corporation Name

MARS BAR OF KENDALL, INC.



Principal Place of Business

**8211 W. BROWARD BLVD.
STE. 420
FORT LAUDERDALE FL 33324**

Mailing Address

**8211 W. BROWARD BLVD.
STE. 420
FORT LAUDERDALE FL 33324**

2. Principal Place of Business

21 8505 Mills Dr

Suite, Apt. #, etc.

22 # R-2

City & State

23 Miami FL

Zip

24 33

Country

25 USA

2a. Mailing Address

26 3801 Hollywood Blvd

Suite, Apt. #, etc.

27 Suite 101

City & State

28 Hollywood FL

Zip

29 33021

Country

30 USA

3. Date Incorporated or Qualified
02/17/1994

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0470689

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**KUSICK, HOWARD A
8211 W. BROWARD BLVD.
STE. 420
FORT LAUDERDALE FL 33324**

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and the corporation

Signature typed or printed name of registered agent and the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **MILLER, SHANNON**
STREET ADDRESS **8211 W. BROWARD BLVD. STE. 420**
CITY - ST - ZIP **FORT LAUDERDALE FL 33324**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

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NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1 NAME **D**
2 NAME **MARK E. VASU**
3 STREET ADDRESS **3801 Hollywood Blvd Suite 101**
4 CITY - ST - ZIP **Hollywood FL 33021**

2 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

3 1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

4 1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

5 1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

6 1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-96

954-964-9993

(U.S.)

Daytime Phone #

CR2E034 (12/95)