## 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

## POCUMENT # P94000023987 (8)

## **FILED** Apr 29 1997 8:00am Secretary of State

MARBOI	N, INC.					 				
Principal Place of Business Mailing Address 821 27TH ST 821 27TH ST WEST PALM BEACH FL 33407 WEST PALM BEACH FL 3 US					<del></del>					
						3. Date Incorporated or Qualified 03/29/1994		te of Last F <b>28/1996</b>	Report	
L	lace of Business	26. Mailing Address 26. SANG AS ALENC.				4. FEI Number 65-0495204	1 00,1	Applied For Not Applicable		
Suite, Apt.		Suite, Apt. #, etc.			<u></u>	5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stati	0	City & State				6. Election Campaign Financing	<del></del>	\$5.00 May Be		
<b>23</b> Zip	Country	Zip	Coun	try		Trust Fund Contribution  This corporation has liability for		tax under s	to Fees s. 199.032.	
24	25 9. Name and Address of Curre	29 nt Registered Agent	30	····		Florida Statutes  10. Name and Address of New Re	Yes O			
BON	IIESKI, MARILYN			31 Na	me					
707 SUNNY S AVE BOYNTON EBACH FL 33436					eet Addre	ress (P.O. Box Number is Not Acceptable)				
			Ľ	33				TART S.		
				34 Cit	y		FL	85 Zip	Code	
office or r agent. I a SIGNATURE	egistered agent, or both, in the State of familiar with, and accept the obligations for the period of the proposed name of registered at					oration submits this statement for the pon's board of directors, I hereby acce	pt the appo	ointment as	registered	
12.		ND DIRECTORS	13.	- Gerk aidi	More require	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	TS IN 12	
TIBLE	P	☐ DELETE	1.1 TITE	E				Change	Addition	
NAME.	BONIESKI, MARILYN		1.2 NAA	AE .	1					
STREET ADDRESS	707 SUNNY SOUTH AVE		1.3 STR	eet ador	ESS				]:	
CITY-ST-ZIP	BOYNTON BEAHC FL	l beietr		-ST-ZIP					1 3 4 4 9 6 1 1	
THLE	st Bonieski, Edward	☐ DELETE	2.1 TITL					L Change	Addition	
NAME STREET ADDRESS	6075 ADAM ST		2.2 NAA	il Eet addri						
CHY-SI-7IP	PALM BEACH GARDENS FL			Y+ST-ZIP	133				1	
1171.6		☐ DELETE	3.1 TITL				-	Change	☐ Addition	
NAME			3.2 NAN	<b>A</b> €						
STREET ADDRESS			3.3 STR	EET ADDR	ess					
CITY-ST-ZIP				Y-ST-ZIP						
THILE		DELETE	4.1 TITL					Change	☐ Addition	
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TITLE		DELETE	5.1 TITL	/-\$T-ZIP				Change	Addition	
NAM <del>[</del>		- Deteri	5.1 HILL 5.2 NAM					- viningo		
STREET ADDRESS				eet addri	:88					
COY-SI-ZIF				-ST-ZIP	~					
TITLE		DELETE	6.1 TITL		_			Change	Addition	
NAME			6.2 NAN	15				-		
STREET ADDRESS			1	EET ADDR	iss					
CITY ST-Z#			1	r-ST-ZIP					·	
	ov certify that the information supplie	ed with this filing does not quali			o stated	in Section 119.07(3)(i). Florida Statute	s. I further	certify that	the	

necesy sering that the mornisuon supplies with this timing does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. Turther 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 43 if changes, or or an attachment with an address.

SIGNATURE: