

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

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AND
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95 APR 27 AM 7:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Kathleen B. Northrup Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000052991 (4)**

1. Corporation Name
MARAM ENTERPRISES, INC.

Principal Place of Business: **9310 Wellington PK Cir**
3401 N. LAKEVIEW DR.
#1608
TAMPA FL 33618

Mailing Address: **3401 N. LAKEVIEW DR.**
#1608
TAMPA FL 33618

2. Principal Place of Business 21 9310 WELLINGTON PARK CIR Suite, Apt. #, etc.		20. Mailing Address 26 9310 WELLINGTON PARK CIR Suite, Apt. #, etc.		4. FET Number 59-3253911		3a. Date of Last Report 1st Report	
22. City & State 23 TAMPA, FL		27. City & State 28 TAMPA, FL		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		3b. Date of Last Report 1st Report	
24. 33647-2537		29. 33647-2537		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		9. This corporation has liability for intangible tax under § 199.005, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent MARASCO, MATTHEW 3401 N. LAKEVIEW DR. #1608 TAMPA FL 33618				10. Name and Address of New Registered Agent <table border="1"> <tr> <td>81. Name</td> <td colspan="3">MARASCO, MATTHEW</td> </tr> <tr> <td>82. Street Address (P.O. Box Number is Not Acceptable)</td> <td colspan="3">9310 WELLINGTON PARK CIR</td> </tr> <tr> <td>83. City</td> <td>TAMPA, FL</td> <td>84. Zip Code</td> <td>33647-2537</td> </tr> </table>				81. Name	MARASCO, MATTHEW			82. Street Address (P.O. Box Number is Not Acceptable)	9310 WELLINGTON PARK CIR			83. City	TAMPA, FL	84. Zip Code	33647-2537
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82. Street Address (P.O. Box Number is Not Acceptable)	9310 WELLINGTON PARK CIR																		
83. City	TAMPA, FL	84. Zip Code	33647-2537																

11. Pursuant to the provisions of Sections 607 (b)(5) 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. Each 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 (b)(5), Florida Statutes.

SIGNATURE: *Matthew Marasco* **MATTHEW MARASCO** **4/18/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	PSTV	1. NAME	MARASCO, MATTHEW
2. STREET ADDRESS	3401 N. LAKEVIEW DR. APT 1608	2. STREET ADDRESS	9310 WELLINGTON PARK CIR.
3. CITY	TAMPA FL 33618	3. CITY	TAMPA, FL 33647-2537
4. NAME		4. NAME	
5. STREET ADDRESS		5. STREET ADDRESS	
6. CITY		6. CITY	
7. NAME		7. NAME	
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY		9. CITY	
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY		12. CITY	
13. NAME		13. NAME	
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY		15. CITY	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.005, Florida Statutes. I further certify that the information is submitted for the annual report or supplemental annual report, and that my signature shall have the same legal effect as if made under oath. The person or persons in direct or indirect control of this corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 of this report, or as an attachment with no additions.

SIGNATURE: *Matthew Marasco* **MATTHEW MARASCO** **4/18/95**