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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

## P94000053671 (1) **DOCUMENT #**

1. Corporation Name ROBERT MARR CONSULTI	NG, INC.	
Principal Place of Business	Mailing Address	
312 BAILEY LANE SARASOTA FL 34237	312 BAILEY LANE SARASOTA FL 34237	
SANASOTA FE SIZO	uninoth te exe	-



Principal Flace	JI DUSIN <del>O</del> SS	Maiii ig Address							
312 BAILEY L SARASOTA FI		312 BAILEY LANE SARASOTA FL 34237							
					3. Date Incorporated or Qualified 3a. Date of 07/18/1994 05/0			Last Report )1/1995	
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number	<del></del>		Applied For
តា		26				59-3249362			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required				
City & State		City & State				6. Election Campaign Financing		\$5.0	O May Be
		28			Trust Fund Contribution		•	d to Fees	
Zip	Country	Zip	Cou	ıntry		B. This corporation has liability for i		under s	199.032,
4	25	29	30			Florida Statutes			
	9. Name and Address of Curren	t Registered Agent		Ĺ.,	,	10. Name and Address of New R	egistered A	ent	
				81	Name				
MARR, R				82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
	LEY L <b>ane</b> Ta fl. 34237			83	-				
SAKASU	IA FL 39231			84	City			<b>85</b> Zi	ip Code
				"	City		FL	-	p 5555
SIGNATURE _	Signature, typed or printed name of registered agent OFFICERS ANI		TE Registered	d Ager	nt aignature required	d when reinstating: ADDITIONS/CHANGES TO OFF	DATE ICERS AND D	IRECTO	DRS IN 12
TITLE	D OFFICERS AND	D DINECTORS    DELETE	1.11	III E		ADDITIONS/GI INTOES TO GIT		Change	Addition
NAME	MARR, ROBERT	<b>_</b>	1.2 N				_		
STREET ADDRESS	312 BAILEY LANE		•		T ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34237				ST-ZIP				
TITLE	0.000	☐ DELETE	2 1 1					Change	☐ Addition
NAME		<del>-</del>	2 2 N	IAME					
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TITLE		DELETE 3		3 1 TITLE				Change	☐ Addition
NAME			3 2 N	IAME					
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NAME			•	(AME					
STREET ADDRESS					T ADDRESS				
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NAME			1		T ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP TITLE		☐ DELETE		TITLE	ST-ZIP			Change	Addition
III CL				14145			_	•	_

6.4 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

6.3 STREET ADDRESS

STREET ADDRESS

SIGNATURE: Robert Marz
SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 941-927-3177
Delte Derjume Phone .

CR2E034 (12/95)