## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400053671 (1)

ROBERT MARR CONSULTING, INC.

			·····		
Principal Plac	e of Business	Mailing Address		, , , , , , , , , , , , , , , , , , ,	17 PT-12- 21-14 T-17- 21-17- 12-21-13-14-14-14-14-14-14-14-14-14-14-14-14-14-
2222 LASALLE ST P.O. BOX 20156 SARASOTA FL 34231 SARASOTA FL 34276-319 US US			56	DO NOT WRITE	IN THIS SPACE
00		03		3. Date Incorporated or Qualified	
				07/18/1994	į
2. Principal P	lace of Business	2s. Mailing Address		4. FEI Number	Applied For
26		26		59-3249362	Not Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has pai Personal Property Tax due June	d the current year Intangible
	9. Name and Address of Curr		1001	10. Name and Address of New Reg	
	AR, ROBERT		81 Name	mark Robert	
312 BAILEY LANE			82 Street	Address (P.O. Box Number is Not Acceptab	le)
SA	RASOTA FL 34237		83 - 2	1222 LESGLIT S	<del>}</del>
			83		
			84 City	rasota	FL 85 Zip Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the Sta in familiar with, and accept the obl Robert Marro Signature, typed or printed name of registered in		authorized by the corplorida Statutes.  TE Registered Agent signature	corporation submits this statement for the p poration's board of directors. I hereby accep required when reinstaling)	/27/98
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12 Change Addition
TITLE	D	DELETE	1,1 TITLE	President	Change Addition
NAME	Marr, Robert		1.2 NAME		12
STREET ADDRESS	312 BAILEY LANE		1,3 STREET ADDRESS		][
CITY-ST-ZIP	SARASOTA FL 34237		1.4 CITY-ST-ZIP		8
TITLE		☐ DELETE	2.1 TITLE	÷	Change Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	::	- + t**
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE [		☐ DELETÉ	3.1 TITLE		Change Addition
NAME			3.2 NAME		1
STREET ADDRESS			3.3 STREET ADDRESS		Į.
CITY-ST-ZIP			3.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DELETE	4.1 TITLE	•	☐ Change ☐ Addition
NAME			4. 2 NAME		)
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition

14. I 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 suppliemental 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

SIGNATURE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Holest Man

DELETE

4/27/90

**FILED** 

May 07 1998 8:00am

Secretary of State

Daviona Phone # 04897

☐ Change ☐ Addition