

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

FILED
May 27 1998 8:00am
Secretary of State

DOCUMENT # P94000063545

1. Corporation Name

RE-MARCOR ENTERPRISES, INC.

Principal Place of Business

Mailing Address

411 Valley Road
Newark, DE 19711

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
8/29/94

2. Principal Place of Business

2a. Mailing Address

21 12 Reese Drive

26 12 Reese Drive

4. FEI Number
59-3264839

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

23 Newark, DE

28 Newark, DE

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip 19711

Country

Zip 19711

Country

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Mark Girardi
411 Valley Road
Newark, DE 19711

81 Name Ronald A. McBride

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

83

84 City Jacksonville Beach

FL

85 Zip Code
32250

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D/P/S/T ☐ DELETE

1.1 TITLE ☒ Change ☐ Addition

NAME Mark Girardi

1.2 NAME

STREET ADDRESS 411 Valley Road

1.3 STREET ADDRESS

12 Reese Drive

CITY-ST-ZIP Newark, DE 19711

1.4 CITY-ST-ZIP

Newark, DE 19711

TITLE D/VP ☐ DELETE

2.1 TITLE ☒ Change ☐ Addition

NAME Earl Girardi

2.2 NAME

STREET ADDRESS 411 Valley Road

2.3 STREET ADDRESS

12 Reese Drive

CITY-ST-ZIP Newark, DE 19711

2.4 CITY-ST-ZIP

Newark, DE 19711

TITLE D/VP ☐ DELETE

3.1 TITLE ☒ Change ☐ Addition

NAME Rita Girardi

3.2 NAME

STREET ADDRESS 411 Valley Road

3.3 STREET ADDRESS

12 Reese Drive

CITY-ST-ZIP Newark, DE

3.4 CITY-ST-ZIP

Newark, DE 19711

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY-ST-ZIP

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-ST-ZIP

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

000002538020

-05/28/98--01012--004

***150.00

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 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: Mark Girardi

4/24/98

(302) 235-1260