

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

FILED

Jun 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000076235
1. Corporation Name Marilar, Incorporated

Principal Place of Business Mailing Address
3121 CABLE DRIVE
HOLIDAY, FL. 34691

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
OCTOBER 14, 1994

2. Principal Place of Business 2a. Mailing Address
21 2909 GULF TO BAY BLVD 26 2909 GULF TO BAY BLVD
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 E-100 27 E100
City & State City & State
23 CLEARWATER 28 CLEARWATER
Zip Country Zip Country
24 33759 25 USA 29 33759 30 USA

4. FEI Number Applied For
59 - 3274396 X Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

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

WILLIAM L. VINSON
110 S. LEVIS AVE
TAMPA SPRINGS, FL 34689 US

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

TITLE DIRECTOR
NAME LAWRENCE K HOLMES
STREET ADDRESS 3121 CABLE DRIVE
CITY-ST-ZIP HOLIDAY, FL 34691

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR
1.2 NAME LAWRENCE K HOLMES
1.3 STREET ADDRESS 2909 GULF TO BAY BLVD, E100
1.4 CITY-ST-ZIP CLEARWATER FL 33759

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

LAWRENCE K. HOLMES 12-98 8/3-

CR2E034 (10/97)