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

PROFIT



FLORIDA DEPARTMENT OF STATE

1	ANNUAL REPORT 1996 Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS								
DOCU 1. Corporat	JMENT # P94(000090317	7 (6)						
Mar\	VIC MANOR, INC.	1 JABIIERI HA JAIII BIRI BANK BANK	1 68 101 18 116 11		181 11 1 11 1881 1881				
Principal Place of Business Mailing Address									
	9TH STREET DERDALE FL 33308	3081 NE 39TH FORT LAUDER	i street Bdale fl 33308						
• 5:						3. Date Incorporated or Qualified 12/14/1994		of Last 7/20/19	
	Place of Business	—	2a. Mailing Address			4. FEI Number	Applied For		
Suite, Ap	t. #. etc.	26 Suite, Apt. #	eto			65-0548780			Not Applicable
22 City & Sta		27	27			Certificate of Status Desired	\$8.75 Additional Fee Required		
23		City & State				Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees		
24	Country Zip 25 29		30 Co				i □ No		
	9. Name and Address of Ci	urrent Hegistered Agent		81	Name	10. Name and Address of New F	legistered	Agent	
COHEN, MARTIN H 7771 WEST OAKLAND PARK BLVD. STE. 205									
						ress (P.O. Box Number is Not Acceptat	ele)		
	LAUDERDALE FL 33351	01E. 200		83					
					City				
					,		FL		ip Code
 11. Pursuan or registe 	t to the provisions of Sections 607. ered agent, or both, in the State of	0502 and 607.1508, Florida Florida, Such change was	a Statutes, the ab	ove-r	named corpor	ration submits this statement for the pur		inging its	registered office
familiar v	with, and accept the obligations of,	Section 607.0505, Florida	Statutes.	00.р	oration a boa	ration submits this statement for the pui rd of directors. I hereby accept the app	JULIUTION (85	registere	agent, ram
SIGNATURE	Signature, typed or printed name of registered	i agent and the if applicable	/NOTE Requesters	d Agor	M. elevables account	d when reinstahrig)			
12.		S AND DIRECTORS	13.		r agracie reguio	ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTO	ORS IN 12
TITLE	D	_		1 1 THLE			· <u>-</u>	Change	DRS IN 12 Addition
NAME	PANCIER, VICTOR		1.2 1	IAME					ł
STREET ADDRESS			1.3 5	STREET	ADDRESS				1
CITY-ST-ZIP TITLE	FORT LAUDERDALE FL 3	3308 □ DELE		CITY-S	T-ZIP				
NAME	PANCIER, MARGARET S	[] DELL		HTLE			E] Change	Addition
STREET ADDRESS				AME TDCCT	ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 3	3308		DIY-S]
TITLE		DELE		TITLE			г	Change	Addition
NAME			32 M	IAME			•	- "	
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STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				ITY-ST	ļ				
TITLE		☐ DELE					Γ) Change	Addition
NAME			6.2 N	AME			_	-	
STREET ADDRESS			638	TAEET	ADDRESS				
CITY-S1-ZIP			640	ity et	710				1

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.

SIGNATURE

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Claytone Proce I