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 # 1. Corporation Name

P95000013688 (3)

MARLIN TOURS, INC.

FILED									
Mar 17 1998 8:00am									
Secretary of State									



Principal Place of Business Mailing Address									10101 1011 1001	
G/O RETTIG C/O RETTIG										
HUBERTUS			PO BOX 221735			DO NOT WRITE IN THIS SPACE				
OC OC	ERMANY 14193	US	HOLLYWOOD FL 33022			3. Date Incorporated or Qualified				
-				02/15/1995			ł			
2. Principal F	Place of Business	2a. Mailing Address	. Mailing Address			4. FEI Number		Ar	oplied For	
21		26	ין יי			65-0559060			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							Additional	
22		27	7			5. Certificate of Status Desired	니	Fee Re	equired	
City & Stat	e	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be	
23						Trust Fund Contribution		Added	to Fees	
Zip	Country	<u>}</u>	, Zip Coun			8. This corporation owes or has p				
24	25		30			Personal Property Tax due Jun		∐ Yes 🍱	No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name										
	RETTIG, H G		٥	' Na	me					
444 SE 11TH TERRACE			8	2 Stre	eet Addre	ss (P.O. Box Number is Not Accepta	ble)			
DANIA FL 33004			8	3		· · · · · · · · · · · · · · · · · · ·				
			8	4 City				85 Žip (Code	
					, 		FL			
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, typied or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when religitating) DATE										
12.	OFFICERS AND		13.	g 0.11 2.g		ADDITIONS/CHANGES TO OFFI		D DIRECTOR	IS IN 12	
TITLE	Р	DELETE	1.1 TITLE	-				Change	Addition	
NAME	RETTIG, OLIVER		1.2 NAMI		ľ				[7	
STREET ADDRESS				1.3 STREET ADDRESS						
CITY - ST - ZIP	BERLIN, GERMANY 14193		1.4 CITY	-ST-ZIP	Ì					
TITLE	RA	DELETE	2.1 TITLE					Change	☐ Addition	
NAME	rettig, H. George		2.2 NAME	:		•	,			
STREET ADDRESS	449 S.E. 11TH TERRACE		2.3 STRE	ET ADDRE	ss					
CITY-ST-ZIP	DANIA FL 33004		2. 4 CITY	-ST - ZIP						
TITLE		DELETE	3.1 TITLE					Change	Addition	
NAME			3.2 NAMI	<u>:</u>						
STREET ADDRESS			3.3 STAE	et addre	ss					
CITY-ST-ZIP			3 4. CITY	-ST-ZIP						
TITLE		DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAM	E						
STREET ADDRESS			4.3 STREI	ET ADDRE	SS					
CITY - ST- ZIP			4.4 CITY	ST-ZIP						
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition	
NAME			5.2 NAME	:	1					
STREET ADDRESS			5.3 STREE	et addre	ss					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP						
TITLE		DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREI	ET ADDAE	SS				}	
CITY-ST-ZIP			6.4 CITY	ST-ZIP						
4 4 11	of all and a first the first of	1 1 1 1 1	-			11 - 440 03/01/01 Et 11 Oc. 4		117 11 141		

I hereby certify that the information supplied with this filling 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 an attachment with an address.

GNATURE:

3/10/98 954 - 923 1450