## 3-27-98 3-3840 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000019832 (1) DOCUMENT #

MARIMAR FASHIONS, INC.

Principal Place of Business

Mailing Address

10720-9 W. FLAGLER STREET SWEETWATER FL 33174

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## **FILED** Mar 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/10/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0564429 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Zip Country Zιp Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes No. 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BORGES, FELIPE 245 N.W. 121ST COURT 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33182** 83 84 City Zip Code 85 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 little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. **PSTD** DELFTE Change Addition TITLE 1.1 TITLE BORGES, FELIPE 1.2 NAME NAME 245 N.W. 121ST COURT 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33182 CITY - ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change TITLE 31 TITLE Addition STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS **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. SIGNATURE: