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

CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **P95000049338**

MARIAN ARNOLD ISRAEL CORPORATION

Principal Place of Business	Mailing Address	_
3320 N. 37TH STREET HOLLYWOOD FL 33021	3320 N. 37TH STREET HOLLYWOOD FL 33021	
Principal Place of Business	2a. Mailing Address	_
21	26	_

**FILED Katherine Harris** 

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90123 031 \*\*\*150.00



3. Date Incorporated or Qu   06/22/1995   2a. Mailing Address   4. FEI Number   65-0594387   Suite, Apt. #, etc.   Suite, Apt. #,	ualifed		
21 26 65-0594387			
	Applied For		
	Not Applicable		
Suite, Apr. #, etc.	sired  \$8.75 Additional		
5. Certificate of Status Des	Fee Required		
City & State 6. Election Campaign Fina	incing 55.00 May Be		
23 Trust Fund Contribution	Added to Fees		
Zip Country Zip Country 8. This corporation owes tr			
24 25 29 30 Personal Property Tax.	Yes □ No		
Name and Address of Current Registered Agent     10. Name and Address of	New Registered Agent		
81 Name			
ISRAEL, MARIAN A  82 Street Address (P.O. Box Number is Not A	82 Street Address (P.O. Box Number is Not Acceptable)		
3320 N. 371FI STREET	on out vide and the control of the c		
HOLLYWOOD FL 33021			
84 City	85 Zip Code		
. City	FL   S   E   S   S   S   S   S   S   S   S		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	for the purpose of changing its registered / accept the appointment as registered		
SIGNATURE	DATE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaturg)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS IN 12		
TITLE D DELETE 1.1 TITLE	Change Addition		
MODATI MADIAN A			
AAAA NI ATTII ATDEET			
HOLLANIOOD EL 22004			
	Change Addition		
_	<u></u>		
NAME 22 NAME			
STREET ADDRESS 23 STREET ADDRESS			
CITY-ST-ZIP 2.4 CITY-ST-ZIP	☐ Change ☐ Addition		
TILE 3.1 TILE 3.1 TILE			
NAME 3.2 NAME			
STREET ADDRESS 3.3 STREET ADDRESS			
CITY-ST-ZIP 3.4. CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE DELETE 4.1 TITLE	C) Change L) Addition		
NAME 4. 2 NAME			
NAME  \$1.2 NAME  STREET ADDRESS  4.3 STREET ADDRESS			
STREET ADDRESS  4.3 STREET ADDRESS  CITY-ST-ZIP  4.4 CITY-ST-ZIP			
STREET ADDRESS   4.3 STREET ADDRESS	☐ Change ☐ Addition		
STREET ADDRESS         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         5.2 NAME	☐ Change ☐ Addition		
STREET ADDRESS   4.3 STREET ADDRESS	Change Addition		
STREET ADDRESS CITY-ST-ZIP 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP			
STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  NAME  STREET ADDRESS  4.3 STREET ADDRESS  5.2 NAME  5.3 STREET ADDRESS	Change Addition		
STREET ADDRESS   4.3 STREET ADDRESS			

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 top 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, with all other like empowered.

6.4 CITY-ST-ZIP