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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000054033

1. Corporation Name

MAR-QUE, INC.

Principal Place of Business

Mailing Address

## Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90058 024 \*\*\*150.00



2915 W LOUISIANA TAMPA FL 33614			2915 W LOUISIANA TAMPA FL 33614				ŀ	DO NOT WRI	TE IN THIS	SPAC	Æ		
			÷					Date Incorporated or Qualifed 07/07/1995					
2. Principal Place of Business 2a. Mailing Address								FEI Number	<u></u>		Ap	plied For	
21			26					59-3347178			No	Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					Certificate of Status Desired		\$8.75 Additional Fee Required			
22		27					<del></del>					<del></del>	
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees						
Zip	Country	28	Zip	Coun	trv	<del></del> -	$\rightarrow$	This corporation owes the curr	ent veer int				
24	25	29	· -	30	,			Personal Property Tax.	ent year in	CY		□No	
24	9. Name and Address of Curre			30				Name and Address of New F	Registered	Agent	:		
	3. Name and Addids of Carre	n rogic		- 1	81	Name			<u>,</u>	_ <del></del>			
MAR	RTINO, THOMAS			Ļ	_		- (5	O Court have to blod Assessed	·hla\				
~160a	2 N FLORIDA AVE			18	32	Street Addr	ress (P	O. Box Number is Not Accepta	able)				
TAM	PA FL 33602			Į	83								
					84	City		<u> </u>		85	Zip (	Code	
	to the provisions of Sections 607.050			- 1	~	-		1	FL	.	İ		
12.	Signature, typed or printed name of registered age OFFICERS AI			13.	901	t signature require		ADDITIONS/CHANGES TO OF	DATE FICERS AN				
12.		ND DIRE				<del></del>		ADDITIONS/CHANGES TO OF	FICERS AN				
TITLE	DP DATE		☐ DELETE	1.1 TITL		Ì			,	()	hange	Additio	
NAME	ROQUE, RAUL			1.2 NAW	_					•			
STREET ADDRESS	314 INVERNESS					ADORESS		D)	, , · · .				
CITY-ST-ZIP	TEMPLE TERRACE FL 33617		☐ DELETE	2.1 TITL	_	-212			<del></del>	ПС	hange	Additio	
	ROQUE, JOAN		C) Occess	2.2 NAM		}			1 21				
NAME STREET ADDRESS.	314 INVERNESS					ADDRESS							
	TEMPLE RTERRACE FL 33617	,		2. 4 CIT		Į.		ċ	•	:			
CITY-ST-ZIP TITLE	DST		☐ DELETE	3.1 TITL	_	·					hange	Additio	
NAME	FERNANDEZ, RALPH			3.2 NAM	NE.	-			• • •				
STREET ADDRESS	2915 W LOUISIANA			3.3 STR	EET	ADDRESS							
CITY-ST-ZIP	TAMAPF FL 33617			3.4. CIT	Y-5	T-ZIP							
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NAME				4. 2 NAM	ИE								
STREET ADDRESS				4.3 STR	EET	ADDRESS							
CITY-ST-ZIP				4.4 CITY	′-ST	r-ZIP							
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NAME				5.2 NAM									
STREET ADDRESS						ADDRESS							
CITY-ST-ZIP				5.4 CITY		r-ZIP						F-1 4 1 199	
TITLE			☐ DELETE	6.1 TITL	Ë					∐C	hange	Additio	

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 officer or director of the corporation or the received block 12 or Block 13 if changed, or on an attach

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-7IP

SIGNATURE:

NAME

STREET ADORESS

CITY-ST-ZIP