## 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

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P95000054578 (6)

MARWAY, INC.

## FILED Jan 15 1998 8:00am Secretary of State



			<u> </u>	181 81111 8188: 81111 18281 1311 <b>58</b> 8
Principal Place of Business	Mailing Address			
2713 1ST AVENUE NORTH	6600 COLONY DRIVE S	•••		
ST. PETERSBURG FL 33713	ST PETERSBURG FL 337	705	DO NOT WRITE IN THIS SPACE	
00			3. Date Incorporated or Qualified	
			07/10/1995	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2713 151 AV	. 11	eny Dr. S.	65-0633369	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			s8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State	1	6. Election Campaign Financing	\$5.00 May Be
23 ST. PETENSBURG	FL 28 ST. Peter		Trust Fund Contribution	Added to Fees
Zip Q 4 a 4 a	wintry 7in	30 Pinellas	8. This corporation owes or has paid th	
24 33713 25 7	ine 1 as 29 33/03	30 Tinellas	Personal Property Tax due June 30.	Yes No
<del></del>	ddress of Current Registered Agent	81 Name	10. Name and Address of New Register	ered Agent
WAKEHAM, WAYNE		oi ivanie:		
6600 COLONY DRIV		B2 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
st petersburg fi	L 33705	83		
		83		
		84 City		- 85 Zip Code
D. D	0-45			FL   10   2   Cook
office or registered agent, or	Sections 607.0502 and 607.1508, Florida Statut both, in the State of Florida. Such change was	authorized by the corpora	poration submits this statement for the purpo ition's board of directors. I hereby accept the	ose of changing its registered appointment as registered
agent. I am familiar with, and	accept the obligations of, Section 607.0505, Fig.	orida Statutes.		
SIGNATURE	hame of registered agost and his diapph cable (NO)	E. Rogistered Agent signature requ		
<b>12.</b>	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE P	DECETE	1.1 TITLE	Abbittono, offanded to office to	Change Addition
NAME WAKEHAM, W		1.2 NAME		,-
STREET ADDRESS 6600 COLONY		1.3 STREET ADDRESS		
CITY-ST-ZIP ST PETERSBU		1.4 CITY - ST - ZIP		
TITLE <b>V</b>	DELETE	2.1 T(1) E		Change Addition
NAME WEST, MARK		2.2 NAM{		
STREET ADDRESS 222 145TH AV	ENUE	2.3 STREET ADDRESS		
CITY-ST-ZIP MADEIRA BEA	CH FL 33708	2. 4 City - St - 2iP		
TITLE	☐ DELETE	3 1 TITLE		Change Addition
NAME		. 3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - S1 - ZIP		
TITLE	☐ DELETE	4.1 TellE		Change Addition
NAME		4 2 NAME		
STREET ADDRESS		4 3 STREET ADDRESS		
CITY-ST-ZIP		4.4.0(TY - ST - ZIP		
TITLE	DELETE	5 1 THILE		Change Addition
NAME		5 2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5 4 CITY - ST - ZIP		
TITLE	☐ DELETE	6111111		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6 3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CMY - S1 - 7IP		
14. I hereby certify that the inform	nation supplied with this filing does not qualify for rt or supplemental annual report is true and acc	or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information
officer or director of the corpo	pration or the receiver or trustee empowered to led, or on an attachment with an address.	execute this report as req	juired by Chapter 607, Florida Statutes; and	that my name appears in