PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000054578

1. Corporation Name

MARWAY, INC.

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90106 021 ***150.00



Principal Place of Business Mailing Address					· ·		
713 1ST AVENUE NORTH 6600 COLONY DRIVE S							
	JRG FL 33713	ST PETERSBURG FL 33705			DO NOT WEET IN T	UC CDACE	
S					DO NOT WRITE IN THE	IIS SPACE	
					3. Date Incorporated or Qualifed		
,		1.0			07/10/1995		
Z. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		pplied For
26					65-0633369		lot Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired	• -	Additional Required
15000	Colony Dr. South						
City & State City & State					6. Election Campaign Financing		May Be
151 <u>Pe</u>	28	Country		Trust Fund Contribution Added to F			
ュクファ	Country	Zip		у	8. This corporation owes the current year		₩ No
12 20	25 U.S.A		30		Personal Property Tax.	Yes	ES NO
	9. Name and Address of Current	Registered Agent	8	Name	10. Name and Address of New Register	ва Аделт	
WΔI	KEHAM, WAYNE		10	Name			
6600 COLONY DRIVE S				Street A	Address (P.O. Box Number is Not Acceptable)		
ST PETERSBURG FL 33705				 			
31 1	I LILIODUNG I L 33/03		8:	5 /			
			8-	City		. 85 Zip	Code
			ľ	,	F	:L]	0
2.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS		
12.	Signature, typed or printed name of registered agent a OFFICERS AND				quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
IILE	P	☐ DELETE	1.1 TITLE	}		☐ Change	☐ Addition
-	WAKEHAM, WAYNE		1.2 NAME				
·1 ADDRESS			1.3 STRE	ET ADDRESS			
ST-ZIP	ST PETERSBURG FL 33705		1.4 CITY-				
	\ V	☑ DELETE	2.1 TITLE	(VICE PRESIDENT	Change	Addition
_	WEST, MARK		2.2 NAME	ļ	WAYNE WAKEHAM 6600 Culony Dr. S.		
······ : ADDRESS	222 145TH AVENUE		2.3 STREI	ET ADDRESS (6600 Culony Dr. S.		
ST-ZIP	MADEIRA BEACH FL 33708		2.4 CITY-	ST-ZIP	ST. Petershing FLORIDA	_3370	S
		DELETE	3.1 TITLE			☐ Change	Addition
			3.2 NAME	}	•		
I ADDRESS			3.3 STREE	TADDRESS			
··· ST 75P			3.4 CITY-	ST-ZIP			
		☐ DELETE	4.1 TITLE			Change	Addition
_			4. 2 NAME				
· · · I ANDRESS			4.3 STREE	TADORESS			
ST ZIP			4.4 CITY-	- 1			
0. 1.		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
-		_	5.2 NAME			_ •	
- I ADURESS			5.3 STREE	TADDRESS			
ST-ZIP			5.4 CITY-			•	
91-CF		☐ DELETE	6.1 TITLE			Change	Addition
			6.2 NAME				
-	}		1	TADDRESS			
I ADDRESS			0.3 3 17(2)	I ADUMESS			
CT 7IP			6.4 CITY-:	- TID			

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, with all other like empowered.