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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000071804 (5)

MARVIN	NAUMAN ENTERPRISES,	INC.						
Principal Place of Business Mailing Address					I HADITADI AKU IBABI BANIN DIDAN BARKI BAKI	il ab idi (baa l H eb) 8/8/ (88)
9900 SW 60TH ST. 9900 SW 60TH ST. MIAMI FL 33173 MIAMI FL 33173-1425								
					3. Date Incorporated or Qualified 09/14/1995	3a, Date 0		eport
}ı	lace of Business	2a. Mailing Address			4. FEI Number 65-0610791		<u> </u>	oplied For ot Applicable
21		Suite, Apt. #, etc.	↓		5. Certificate of Status Desired	_ \$	CO 75 A 44/91	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution			
Zip 24	Country Zip C 25 29 30		Country	/	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes & No		. 199.032,	
	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HOC	OPER, LARRY K		81	Name	ŕ			
	25 SW 177TH AVE.		82 Street Addr		ress (P.O. Box Number is Not Acceptable)			
HOI	MESTEAD FL 33030		83					
			64	City			5 Zip (Code
						FL.		
office or nagent 1 co	m familiar with, and accept the obli	igations of, Section 607.0505, Fk	orida Statute:	\$. 	poration submits this statement for the sation's board of directors. I hereby accel		ment as	registered
12.	Signature, typed or printed name of registered a OFFICERS A	igen: and little if applicable (NOT IND DIRECTORS	13.	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DI	RECTOR	S IN 12
THE	PSD	☐ DELETE	1.1 TITLE				Change	Addition
NAM	NAUMAN, MARVIN E		1.2 NAME					
STREET ADDRESS	9900 SW 60TH ST.		1.3 STREET ADDRESS					
CITY-51-70	MIAMI FL 33173 VTD	Distre	1.4 CITY - 5	ST-ZIP			Change	☐ Addition
NAMÉ	MALIERANI DEVER ME		2.1 TITLE 2.2 NAME	Ì			CHange	☐ ADGIIIDII
STREET ADDRESS	9900 SW 60TH ST.		2.3 STREET ADDRESS					l
City - ST - ZIP	MIAMI FL 33173		2. 4 CITY - ST - ZIP					
TITLE			3.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME			3.2 NAME	[
STREET ADDRESS			1	ADDRESS				
CITY 51-2IP				ST-ZIP			Change	Addition
NAME.		oxere	4.1 TITLE 4.2 NAME				Orango	
STREET ADDRESS				T ADDRESS				
GHY-Sf-201			4 4 CITY - 5	i				
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME	i				ļ
STREET ADDRESS				T ADDRESS				
CHY-ST Ziff		DELETE	5.4 CiTY-5	ST - ZIP			Change	Addition
NAMÉ		- DECEME	6.2 NAME			ب	Silango.	- 3001001
STREET ADDRESS			i i	T ADDRESS				

SIGNATURE: Man E Manue MARUN E NAVAN 30 APER 97 305-681-5847

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling 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.