FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT 1996	Socre	B. Morthani tary of State CORPORATIONS		
	00082703 (6	3)		
MARCOS ART, CORP.			#	
rincipal Place of Business	Mailing Address			
4095 S.W. 137TH AVE. SUITE 8 MIAMI FL 33172	4005-0:W:-407FH-AVI 3WTE-8 MIAMIL-FL-00170	E .	3. Date Incorporated or Qualified	3a. Date of Last Report
Principal Place of Business	2a. Mailing Address	127 λυο	10/27/1995 4. FEI Number 65 – 061 6021	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	. 137 Ave	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	27 113 City & State 28 Miami, F	1	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zφ 29 33186	Country 30 DADE	8. This corporation has liability for Florida Statutes	intangible tax under s 199.032, ∐No
9. Name and Address of Cur	rrent Registered Agent	81 Name	10. Name and Address of New F	tegistered Agent
VANEGAS, MARCOS 9010 S.W.1 37TH AVE.			ress (P.O. Box Number is Not Acceptab	ole)
SUITE 113 MIAMI FL 33186		83 84 City		85 Zip Code
Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida Statu		ration submits this statement for the pu	
Pursuant to the provisions of Sections 607.0 or registered against or both, in the State of Fanniar with, and accept the obligations of Sections (1.2).	Töp in Such change Was authori Hon 607,0505, Florida Statute	zed by the corporation's boa s	ird of directors. Thereby accept the app	ointment as registered agent. I am
	agentario torril applicable (N AND DIRECTORS	IOTE: Rugistardo Agent signature require	ed when reinstaing' ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
PD VANEGAS, MARCOS	[] DELETE	1. 1 TITLE 1.2 NAME		☐ Change ☐ Addition
REET ADDRESS 4095 S.W. 137TH AVE. #	8	13 STREET ADDRESS		
IY-ST-ZIP MIAMI FL 33172	DELETE	14 CRY-ST-ZIP 2 1 TITLE		Change Addition
ME		2.2 NAME 2.3 STREET ADDRESS		
REFI ADDRESS IY-SI-ZIP		2.4 CITY-ST-ZIP		
LE ME	T DELETE	3 1 TITLE 3 2 NAME		Change Addition
TREET ADDRESS		3.3 STREET ADDRESS		
Y-ST-ZIP LE	[] DELETE	3.4 C(1Y-S1-Z(F)	And the second s	Change Addition
AME		4.2 NAME		
REET ADDRESS Y-ST-ZIP		4.3 STREET ADDRESS : 4.4 CITY-ST-ZIP		
TLF	DELETE	5. 1 111LE		Change Addition
ME REET ADDRESS		5.2 NAME 5.3 STREET ADDRESS		
IY-SI-ZIP	En priess	5.4 C(TY - \$1 - Z(f)		Chance Addison
TLE AME	☐ DEFE1E	6 1 TITLE 6.2 NAME		Change Addition
REET ADDRESS		6.3 STREET ADDRESS		
TY-ST-ZIP 4. I do hereby certify that the information suppl	led with this fling is voluntarily fu	€ 4 CITY - ST- ZIP rnished and does not qualify	for the exemption stated in Section 119	0.07(3)/k), Florida Statutes. I further
 certify that the information indicated on this oath; that Jam an officer or director of the o 	annual report brisupplemental ar	inual report is true and accui tee empowered to execute th	rate and triat n'iy signature sha⊪ have the	e same legal effect as il made under
	, or correct the second of the		april 29	-9E
SIGNATURE: FIGURE KNUTYPE	ED ON PRINTED NAME OF SIGNING OFFI	CER OR DIRECTOR	Prom C	Daytime Phone #