FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000093666 (2)**

1. Corporation Name

MARTINO INDUSTRIES, INC.

Principal Place of Business	Mailing Address
3661 W. BLUE HERON BLVD. RIVIERA BEACH FL 33404	3661 W. BLUE HERON BLVD. RIVIERA BEACH FL 33404

3. Date Incorporated or Qualified: **12/04/1995**

3a. Date of Last Report:

4. FEI Number: 65-0624376 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired: [X] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: [ ] **$5.00** May Be Added to Fees

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.: 22	Suite, Apt. #, etc.: 27
City & State: 23	City & State: 28
Zip: 24 Country: 25	Zip: 29 Country: 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [X] Yes [ ] No

9. Name and Address of Current Registered Agent

LIOCE, DOMENICK R
1645 PALM BEACH LAKES BLVD.
SUITE 1200
W. PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Signature, type or print name of registered agent and title if applicable) (NOTE: If registered agent signature required when not filing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Chief Executive Officer	[ ] DELETE	1.1 TITLE [ ] Change [ ] Addition
NAME	Thomas D. Bieneman		1.2 NAME
STREET ADDRESS	14402 Larkspur Ln.		1.3 STREET ADDRESS
CITY-ST-ZIP	West Palm Beach, FL		1.4 CITY-ST-ZIP
TITLE	President	[ ] DELETE	2.1 TITLE [ ] Change [ ] Addition
NAME	Joel A. Martino		2.2 NAME
STREET ADDRESS	109 Ocean Terrace		2.3 STREET ADDRESS
CITY-ST-ZIP	Palm Beach, FL		2.4 CITY-ST-ZIP
TITLE	Secretary	[ ] DELETE	3.1 TITLE [ ] Change [ ] Addition
NAME	Thomas D. Bieneman		3.2 NAME
STREET ADDRESS	14402 Larkspur Ln.		3.3 STREET ADDRESS
CITY-ST-ZIP	West Palm Beach, FL		3.4 CITY-ST-ZIP
TITLE	Treasurer	[ ] DELETE	4.1 TITLE [ ] Change [ ] Addition
NAME	Joel A. Martino		4.2 NAME
STREET ADDRESS	109 Ocean Terrace		4.3 STREET ADDRESS
CITY-ST-ZIP	Palm Beach, FL		4.4 CITY-ST-ZIP
TITLE		[ ] DELETE	5.1 TITLE [ ] Change [ ] Addition
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE		[ ] DELETE	6.1 TITLE [ ] Change [ ] Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Thomas D. Bieneman 3/29/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Daytime Phone #

CR2E034 (12/95)