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. Corporat	MAR ENTERPRISES INC.	0002000	00 (4)						
Principal Place of Business Mailing Address						- I HOBINDAN DID TOTAL BUILD DUINT	OBERL BORRO BORRO ARA	LO CTIVO BITAL DI	(14 B(I) (AA)
	GRASS DRIVE. #6102 DN FL 33434		19674 SAWGRASS DRIVE. #6102 BOCA RATON FL 33434			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						03/20/1996			
· ·	Place of Business	2a. Mailing	2a. Mailing Address			4. FEI Number		A	pplied For
1		26				11-3026940			ot Applicable
Suite, Apt. #, etc.		Suite, /	Suite, Apl. #, etc.			5. Certificate of Status Desir	ed 🗆		Additional equired
City & St	ato	City & :	City & State			 Election Campaign Finance Trust Fund Contribution 	cing		May Be to Fees
Zip	Country 25	Zip 29		Count 30	ry	This corporation owes or Personal Property Tax du		_	tangible No
	9. Name and Address of Cu	rrent Registered A	pent			10. Name and Address of N	ew Registered	Agent	
11. Pursuar office or agent. I	nt to the provisions of Sections 607 r registered agent, or both, in the S am familiar with, and accept the o	.0502 and 607,1508 state of Florida Such bligations of, Section	, Florida Statute i change was a n 607.0505, Flo		City ve-named copy the corpoes.	orporation submits this statement for eration's board of directors. I hereby	r the purpose of accept the app	•	Code ts registered registered
SIGNATURE	Signature, typed or printed name of registers	d soon and little if suplicable	e (NOTE	- Registered A	gent signature re	quired when reinstating)	DATE		
12.		AND DIRECTORS	, (1012	13.		ADDITIONS/CHANGES TO		D DIRECTOR	RS IN 12
TITLE	₽D		DELETE	1.1 TITLE				Change	Addition
NAME	CHARWAT, ARTHUR C			1.2 NAM	Ε				
STREET ADDRESS	19674 SAWGRASS DRIVE	, #6102		1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33434		1.4 CITY	- ST- ZIP					
TITLE	SD	DETELE		2 1 TITLE				Change	Addition
NAME	CHARWAT, MARYLIN			2.2 NAM	E				
STREET ADDRESS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	#6102		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		56.5-		-ST-ZIP			T-1.6	7 (40)
TITLE			DELETE	3.1 TITLE				Change	Additio
NAME	1			3.2 NAM					
STREET ADDRESS	\$ 				ET ADDRESS				
CITY-S1-ZIP	 	 	Loriere	3 4. Cily				Chance	6.44111
TITLE			DELFTE	4.1 TITLE				Change	☐ Addition
NAME	t .			4. 2 NAM	E i				

CITY-ST-ZIP 14. 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 supplience 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 of 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 my an address

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

54 CITY-ST-ZIP

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

61 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

NAME

☐ DELETE

DELETE

FILED

Mar 09 1998 8:00am

Secretary of State

561-883-6745

Change

Addition

Addition