FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

P96000034520 (2) DOCUMENT #

MARAE, INC.

Suite Apt # etc

VERO BEACH FL 32960

City & State

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 $Z_{\rm IP}$

Principal Place of Business	Mailing Address	
1736 31ST STREET VERO BEACH FL 32960	1736 31ST STREET VERO BEACH FL 32960-3150	
		3. Date Incorporated or Qualified 04/19/1996
2. Principal Place of Business	28. Mailing Address	4. FEI Number

28

Suite, Apt. #, etc.

City & State

Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MCHUGH, JOHN J JR 333 17TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE U

84 City 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.

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SIGNATURE	Sequence type to organize the electric specimentage of and little dispolations. (NOTE	Registered Agent signature	e required when reinstaking) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DELETE	1.1 TITLE	ρ6 Change X Addition
NAME		1.2 NAME	Karthy R. Prickett 1736 31 Ave. Very Beach FL 32960 Change LE Addition
STREET ADDRESS		1.3 STREET ADDRESS	1736 314 AVE.
CITY - ST - ZIP		1.4 CITY - ST - ZIP	Vero Beach FL 32960
THTLE	DELETE	2 1 TITLE	V/T ☐ Change ☑ Addition
NAME		2.2 NAME	Mark 3. Prickett 1734 315 Ave. Vero Beach FL 32960
STREET ADDRESS		2.3 STREET ADDRESS	1736 315 Ave.
CHY-SI-ZIP		2 4 CITY+ST-ZIP	
TITLE	☐ DELETE	3 1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY-ST-ZIP	
TITLE	DELETE	4.1 DILE	Change Addition
NAME		4. 2 NAME	
STREET ALORESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	DELETE	5.1 THLE	Change Addition
NAME		5.2 NAME	
STREET ALBURESS		5.3 STREET ADDRESS	
City-St-7P		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADORESS		6.3 STREET ADDRESS	
CITY: ST-2IF		6.4 CITY-ST-ZIP	

I do hereby certily 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

Kuly R. Puckett, President Kuthy R. Prickett

561.569.334/

FILED

Jan 21 1997 8:00am

Secretary of State

3a. Date of Last Report

65.0670907

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable