SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000073934 (7)

NO TAN LINES, INC.

Principal Place of Business

3033 MONUMENT ROAD STE 9 JACKSONVILLE FL 32114-3415 Mailing Address

3033 MONUMENT ROAD STE 9 JACKSONVILLE FL 32114-3415 97 JUL 18 AM 10: 32
SECRETARY OF STATE
TALLAMASSET FLORIDA



NOVIOUANTE LE 25114-2412 TACK	DO NOT WRITE IN THIS SPACE								
			3. Date Incorporated or Qualified 3a. Date of Last Report 2/25/97						
	ailing Address 233 Monua	nent Rd.	4. FEI Number 59-33995/9	Applied For Not Applicable					
Suite, Apt. #, etc. Su	ite, Apt. #, etc. Buite 9		5. Certificate of Status Desired	\$8.75 Additional Fee Required					
	v & State		6. Election Campaign Financing	\$5.00 May Be					
23 Jacksonville F.L. 28 J	aeksonvill	e f.L.	Trust Fund Contribution	Added to Fees					
Zip Country Zip)	Country	8. This corporation owes or has paid	d the current year Intangible					
24 Jala 5 25 US 29 32	22.25 30	20	Personal Property Tax due June :						
g, Name and Address of Current Registere	ed Agent		10. Name and Address of New Reg	Istered Agent					
SCHECTER, RANDAL L 1030 W INTERNATIONAL SPEEDWAY BLVD STE 210 DAYTONA BEACH FL 32114-3415 81 Name Locat Labraca Street Address (P.O. Box Number is New Agreeptable) 1000 Locat Labraca 1000 Locat Labrac									
•		83							
			elsonville	FL 85 Zip Code 32225					
 Pursuant to the provisions of Sections 607.0502 and 607.1 office or registered agent, or both, in the State of Florida. 	Such channe was auth	norized by the corporati	oration submits this statement for the pu ion's board of directors. I hereby accep-	rpose of changing its registered the appointment as registered					
agent. I am familiar with, and accept the obligations of, Se		la Statutes.	·	mlula-					
SIGNATURE Signature, typed or printed name of registered again and title if app		egistered Agent signature require		1/17/97					
12. OFFICERS AND DIRECTO		ngistareo Agent signature require	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12					
TITLE	DELETE		Shert	Change Addition					
NAME .	_		bert Cabrera						
STREET ADDRESS	4 .	1.3 STREET ADDRESS	5/ Mouner + AD	APTIOOZ					
CHY-SI-ZIP	- 9 ≠	1.4 CITY - ST - ZIP	icksonville. FL 322						
TITLE	DELETE	2.1 TITLE	erresident	Change Addition					
NAME		2.2 NAME	hard forbrich						
STREET ADDRESS		2.3 STREET ADDRESS 50	59 Sharow Terrace						
CITY-ST-ZIP See See See See See See See See See Se		2.4 CITY-ST-ZIP	acksonville FL 322	16					
TITLE CETE. TO	☐ DELFTE) Y-7 7	cretary.	Change Addition					
NAME			and Forbrich						
STREET ADDRESS		3.3 STREET ADDRESS 50	59 Sharon Terrace	'-					
City-St-Zip		3.4. City-SI-ZiP	rexsonile fl 32.						
TIME CONTRACTOR	☐ DELETE		easurer	☐ Change ☐ Addition					
NAME,		4.2 NAME	bert Cabrera	-					
STREET ADDRESS		4.3 STREET ADDRESS 45	1 Monument Rd. AP.	1002					
CITY-91-ZIP		4.4 City-St-ZiP 3 a	ecsomily fig 32	225 150					
TITLE	TT DEFETE	5 1 TITLE	-07/2479	1701-177 015 ADDITION					
NAME		5.2 NAME	****165	.00 ****165.00					
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NAME		6.2 NAME	ດດດດດີຮີຣີ	471502 701107015					
STREET ADDRESS		6.3 STREET ADDRESS	-01/24/9	17U11U7U15					
14. I do hereby certify that the information supplied with this fi	ling done not qualify to	6.4 CITY-ST-ZIP	****165						
information indicated on this annual report or supplemental am an officer or director of the corporation or the receive appears in Block 12 or Block 18 if changed or on an attack.	al annual report is true ir or trustee empowere	and accurate and that d to execute this report	my signature shall have the same legal	effect as if made under oath; that					

2-2

No Tan Lines Inc.

No Tan Lines Inc.

3033-9 Monument Rd. Jacksonville, Florida 32225 Phone (904) 996-0012

Fax (904) 996-0116

July 14, 1997

Florida Department Of State Sandra B. Mortham Secretary of State

Division Of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Sirs:

I received the second notice for filing the 1997 Profit Corporation Annual Report, however, I have already filed the report on February 24, 1997. Our record shows that we wrote a check for \$165.00 on the same day we mailed such report. I called to inquire about the discrepancy and was informed that the previous report was rejected and sent back along with our check. However, we never received the returned document or we would have acted promptly to insure a speedy return. Due to the fact that we never received the returned document and were not aware of the rejection, I feel that it would be unfair to charge us for the penalty fee. I have enclosed a check for \$165.00 along with the document and hope for your understanding.

Sincerety,

Robert A. Cabrera

President

SECOND'NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400065113 (0)

MARSHSIDE, INC.

Principal Place of Business Mailing Address
10991--28 SAN JOSE BLVD 8160 MERGANSI

Profile Control

97 JUL 18 MI ID: 28

SECKLIARY OF STATE TALLAMAGGEE FLORIDA



10991-28 SA JACKSONVILI US	IN JOSE BLVD Le fl 32223			B160 MERGANSER DRIVE PONTE VEDRA BEACH F		2				DO NOT WRIT	E IN THIS	SPACE	
									 Date Incorporat 09/06/1994 			ate of Last R 3/19/1996	•
2. Principal P	Place of Business		28	, Mailing Address				4	I, FEI Number			Ap	oplied For
21		···	26						59- 327047	79		No.	ot Applicable
Suite, Apt.	#, etc.		27	Suite, Apt. #, etc.				5	6. Certificate of St	atus Desired			Additional equired
City & Stat	e		26	City & State				6	3. Election Campa Trust Fund Conf		_0	\$5.00 Added	
Zip		Country	1	Zip	С	ountry		8	. This corporation		paid the cu	rrent year Int	angible
24	25		29		30				Personal Proper	rty Tax due Jur	ie 30.	X Yes] No
	9. Name and	Address of Current	Regis	stered Agent				10). Name and Add	Iress of New F	Registered	Agent	
SL	AGLE, SUSAN					81	Name						
4 190 BELFORT ROAD SUITE 240					82 Street Address (P.O. Box Number is Not Acceptable)								
JACKSONVILLE FL 32216				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, typed or prin	nted name of registered agent	and tille	e it applicable. (NOT	F Registe	wed Ager	nt signature re	required who	en reinstating)		DATE		
12.		OFFICERS AND	DIRE		13	3.			ADDITIONS/CHA	NGES TO OFF	ICERS AND	DIRECTOR	RS IN 12
TITLE	D			☐ DELETE	1.1	Tille			C71C781C	0002;	~~ n.c	Change	Addition
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CITY-ST-ZIP	PONTE VED	RA BEACH FL 320	82		1.4	CITY - ST	- 21P			**************************************	33.00	*******	33.00
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NAME	SLATTERY,				2.2	NAME							
STREET ADDRESS					2.3 \$		ADDRESS						
CITY-ST-ZIP	PONTE VED	ra Beach FL 320	82		2.	4 CITY - S	T-ZIP						
TITLE				☐ DELETE	3.1	TITLE						Change	Addition
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NAME				المام		NAME						change	
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CITY-ST-ZIP	by certily that the	information supplied	with If	his filing does not quali		icity-\$1 ie exer		ated in S	Section 119.07(3)(i). Florida Statu	les. I furthe	r certify that	tion of

1. To hereby certify that the information supplied with this fligg does not quality for the exemption stated in Section 1.9.07(3)(1), Florida Statules. I runner certify that information indicated on this annual report is rupplemental entitle report is true and accurate and that my signature shall have the same logal effect as if made under logal. That I am an officer or director of the domestic or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my flashing appears in Block 12 or Block 13 if granged, or on an argument with an address.

MARY R. SLATIERY 7/

July 15, 1997

904-268-5858

State of Florida Division of Corporations Annual Reports Section P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir/Madam:

RE: MARSHSIDE INC. - P94000065113 (O)

This is to inform you that your "2nd Notice" to file the 1997 Profit Corporation Annual Report was, in fact, the *very first* notification received. I called the offices of my registered agent - Susan Slagle - to see if they had received it, but they have nothing on record. They indicated that they often receive the 2nd notice, but not the first.

Therefore, I then telephoned your offices regarding this situtation and the concern to avoid this happening again in the future. I was instructed to file the return enclosing a check for \$165.00 with this letter of explanation. I do request and hope that you will consider this to be a legitimate request for waiver of the late fee as I file all government forms and taxes in a prompt matter and would not have overlooked this document had I received it.

Thank you very much for your consideration.

P Stud

Sincerei

President - Marshside Inc. dba The Great Frame Up