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

appears in Block 12 or Block 13 if changed or on an attachment with an address.

May 19 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Socretary of Blate 1997 DIVISION OF CORPORATIONS DOCUMENT # P96000086285 (9) JUNIOR MARLINS, CORP. Principal Place of Business Mailing Address 2375 SW 141 AVE. MIAMI FL 33175-7052 2375 SW 141 AVE. -MIAMI FL 33175 3. Date Incorporated or Qualified 3a. Date of Last Report 10/18/1996 2. Principal Place of Business 28. Mailing Address 26/1331 SW136 PL Applied For 13315W 136P Not Applicable Suite, Apt. #. etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required 6. Election Campaign Financing \$5.00 May Bo Miam 23 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible j x under s. 199.032. 24 25 29 Florida Statutos Yos 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Benigno ORTA, BENIGNO 2375 SW 141 AVE. 82 of Amplable in Fl 33184 **MIAMI FL 33175** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Soctions 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 printed name of registered agont and title it applicable (NOTE Engithered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)DPST DELFTE TITLE 1.1 THE ORTA, BENIGNO NAME 1.2 NAME 2375 SW 141 AVE. STREET ADDRESS 1.3 \$1RLET ADDRESS MIAMI FL 33175 CITY-ST-ZIP 1.4 C/TY - S1 - Z/P DELETE TITLE 2.1 TITLE Addition NAME 2.2 NAM5 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 C(1Y - S1 - Z(P TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP TITLE DELFTE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELFTE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE TITLE 6.1 TITLE Chapne Addition NAME § 2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CHY - \$1 - 7IP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 frustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name

FILED

11/04/04