NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P9600009 1348

IVMAR INVESTMENT, INC.

FILED Aug 13 1997 8:00am Secretary of State

954 561-7881

Principal Place of Business Mailing Address									
2603 North Dixie Highway Same									
	Done								
112200	n Manors, FL 33334					e Incorporated or Qualified	3a. Date of Last F N/A	Report	
2. Principal Pi	2a. Mailing Address	_			Number				
21 2603 1				cie Highway		1 2 2 1 2 2		ot Applicable	
Suite, Apt.	#, elc.	Suite, Apt. #, etc.			5. Ce	rtificate of Status Desired	1 1	Additional equired	
City & State		City & State			6. Ele	ction Campaign Financing	\$5.00	May Be	
23 Wilton	n Manors, FL	28 Wilton Manors, FL			Tru	st Fund Contribution	☐ Added	to Fees	
Zip	Country	Z _I p	Country			· -	ntangible tax under s. 199.032,		
24 33334	25 USA	29 33334	30 US	A			Yes No		
•	9. Name and Address of Current	Registered Agent	8	I Norna	• • • • • • • • • • • • • • • • • • • •	me and Address of New Re			
Marta	Orta		ľ	Name /	Alan G.	an G. Kipnis, Esquire			
19931	Northeast 21st Aven	ue	8:			dress (P.O. Box Number is Not Acceptable)			
	Miami Beach, Florid		L			ial Plaza			
North Main, Beach, Florida 35179						}			
			8	F	ort Lauc	lerda1e	FL 85 33.	Code 394	
11. Pursuant	to the provisions of Sections 617.0502 equaters regent, or both, in the State of m tamilia, with, and advept the stoligat	and 607.1508, Florida Statut	les the abo	ve-named	corporation su	bmits this statement for the p	urpose of changing	its registered	
office or re agent. La	egistered agent, or both, in the State o m tamilia: With, and accept the obligat	f Florida: Such change was jons of, Section 607.0505, FI	authorized t orida Statuti	by the corp	oration's boar	d of directors. I hereby accep	nthe appointment as	s registerea	
CICNATURE	alla 6 Mil	J		Alan (G. Kipni	.s, Esquire/Regi	stered Age	nt	
SIGNATURE	Signature. Typed or minted name of registered agree	and title if applicable (NO)	lt : Registerco A	gen: signature i	required when reins		DATE		
12.	OFFICERS AND		13.			ITIONS/CHANGES TO OFFIC			
TITLE	President/Directo	r XX DELETÉ	1 1 1/TLE			nt/Director	bak Change	Addition	
NAME	Marta Orta		1.2 NAME	.		rio Martinez			
STREET ADDRESS			1 3 S1RE			orth Dixie Highw			
CITY - \$T - ZIP	North Miami, Beach			ST-ZIP	Wilton	Manors, FL 3333			
TITLE		DELETE 2					Change	Addition	
NAME			2 2 NAME						
STREET ADDRESS				2.3 STREET ADDRESS				i	
CITY-ST-ZIP	DELETE			2 4 CITY - ST - ZIP			Change	Addition	
TITLE	L) Dett it		3 1 1171.	3 2 NAME			L., Change	L_J Addition	
NAME									
STREET ADDRESS				T ADDRESS				ì	
CITY-ST-ZIP		DELEJE	3.4 CITY 4.1 TITLE	-51-207			Change	Addition	
TITLE		_ beech	4. 2 NAM	, l					
NAME OTREET ADDRESS				ET ADDRESS					
STREET ADDRESS			4.4 CITY	- 1					
CITY+\$T+ZIP TITLE	<u> </u>	☐ DELETE	5 1 TITLE				Change	Addition	
NAME			5.2 NAM	I				υ <u>ς</u>	
STREET ADDRESS				ET ADDRESS			1	12	
CITY - ST - ZIP			5.4 CITY	· · · · · · · · · · · · · · · · · · ·				8.17	
TITLE		DELETE	6.1 1111.6				Change	Addition	
NAME		_ ·· ·	6.2 NAM	- 1				_	
STREET ADDRESS				EL ADDRESS		20000228	าก4กกค		
CITY - ST - ZIP			64 CITY	I		***550.00	301 000		
4 1 1 1 1 1 1 1	by certify that the information supplied	with wis filing does not qual	if a for the ex	comption of	tated in Sect o	n 110 07/27/J. Elocido Statuto	s. I further certify tha	t the	
informatio I am an o appears i	by certify that the information supplied on indicated on this amount report or sylficer or director of the corporation of in Block 12 or property is if clightight.	pplemental annual report is he receive Otrustee empor on to hitlad prient with an ad	true and ac wered to exc Idress	curate and ecute this r	I that my signa report as requi	ture shall have the same lega red by Chapter 607, Florida S	I effect as if made un itatutes; and that my	nder oath; that name	