→ FILE 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 # P96000097697 (2)

FILED Mar 03 1997 8:00am Secretary of State

MERIN (& ASSOCIATES, INC.				
Principal Place of Business 322 STIRRUP KEY BLVD. MARATHON FL 33050		Mailing Address 322 Stirrup Key Blyd. Marathon Fl 33050-2933		T LOBELLOOK HAD IDNIE OMALLOOMY ORTHI DONIE SAME SOME SOME THAD IDNI 1001 1004	
ļ				3. Date Incorporated or Qualified 3 11/27/1996	a. Date of Last Report
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		93-1227576	Not Applicable
Suite, Apt 22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ite:	City & State	•	6. Election Campaign Financing	\$5.00 May Be
23 Z:p	Country	28 Zip	Country	Trust Fund Contribution	
2 ip [24]	25	h	30	6. This corporation has liability for intan	
[24]	9. Name and Address of Cur		301	10. Name and Address of New Registe	
BEN	INETT, ROBERT N		81 Name		
322 STIRRUP KEY BLVD. MARATHON FL 33050				dress (P.O. Box Number is Not Acceptable)	
			83		
	1		84 City		FL 85 Zip Code
11. Pursuant	t to the provisions of Sections 607.0	0502 and 607.1508, Florida Statute	s, the above-named cor	poration submits this statement for the purporation's board of directors. I hereby accept the	ose of changing its registered
office or agent 1 a	registered agent, or both, in the St am farithar with, and accept the ob	alle of Florida. Such change was a illgations of, Section 607.0505, Flo	rida_Statutes.	ation's board or directors. I hereby accept the	a appointment as registered
SIGNATURE	1 thutten Derd	the 61+ Kenseet W	BENUTT	- PESIDENI	-626517
					ATE CAND DIDECTORS IN 10
12.	VD CONTIGENS	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAV:	BENNETT, ROBERT N	L. 9	1.2 NAME		
STREET ADDRESS	AND OTHORNER MEN BLUE		1.3 STREET ADDRESS		
CITY - S1 - ZIP	MARATHON FL 33050		1.4 CHTY-ST-ZIP		
TOLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
SUPERI ADDRESS			2.3 STREET ADDRESS		
CHTY - ST - ZIF		Dotte	2. 4 CITY-ST-ZIP		Change Addition
Title		☐ DELETE	3.1 TOTLE		Change Addition
NAME	!		3.2 NAME		
STREET ACCORESS			3 3 STREET ADDRESS		
CITY-ST-ZP TITLE		☐ DELETE	3 4. CITY-ST-ZIP 4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST ZIP			4.4 CiTY-ST-ZiP	<u> </u>	
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME	\$	
STREET ADDRESS			5.3 STREET ADDRESS	• ***	
Cify-ST ZiP			5.4 CITY - ST - Z(P		
1614		DELETE	6.1 TITLE	利権 シカ	Change Addition
NAME			6.2 NAME	• •	
STREET ADDRESS	1		6.3 STREET ADDRESS	+ k	
CHY-ST-74P	1 L		64 CITY-ST-ZIP		

14. I do 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 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 efficer 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

SIGNATURE: