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 # P96000098118 (8)

MARK-DEV ENTERPRISE INC.

Prino	sipal Place of Business	Mailing Address		···					
721 81	E 17TH ST UDERDALE FL 33316	721 SE 17TH ST FT LAUDERDALE FL 33316-21	927						
		·				3. Date Incorporated or Qualified 12/04/1996	За.	Date of Last Report	
2. Pi	rincipal Place of Business	2a, Mailing Address 26				4. FEI Number 65.07/2/192		Applied For Not Applicable	
22 St	ulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23	ity & State	City & State	k-n *			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
24 Zi	ip Country 25	Z/p 29 3				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
LAMOTHE, FERNAND				1	Name				
721 SE 17TH ST FT LAUDERDALE FL 33316				2	Street Address	ress (P.O. Box Number is Not Acceptable)			
	, , , , , , , , , , , , , , , , , , ,		8	3					
			8	4	City		F	85 Zip Code	
1	Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Staagent, I am familiar with, and accept the obl	ite of Florida. Such change was au	ithorized b	bγ t	named corpora the corporation	ation submits this statement for the p 's board of directors. I hereby acces	ourpos of the a	e of changing its registered appointment as registered	
SIGN	NATURE Signature, typed or printed name of registered	AlCTA	Electrical A		I s gnature required w	ulan epinetalised	DAT	F	
			13.	- William	a grioraic required v	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	DELETE	1.1 TILLE					Change Additio	
	I AMOTHE EEDWAND		1.0 000	r	1				

STREET ADDRESS 721 SE 17TH ST 1.3 STREET ADDRESS FT LAUDERDALE FL 33316 1.4 CHY-\$1-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TRUE TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-S1-ZIP CITY-ST-ZIP Addition Change TITLE ☐ DELETE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change ___ Addition TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 61 TOLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 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 arrival 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 fam an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed, or on an attachment with an indexes.

CIGNIATURE.

nd Roughly

Poel 21. 97

1954)768-9548

FILED

Apr 28 1997 8:00am

Secretary of State

CR2F034 (9/96)