

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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000045138 (9)

1. Corporation Name
MARILYN DEMARTINI, INC.

Principal Place of Business
2455 E. SUNRISE BLVD.
STE 502
FT LAUDERDALE, FL 33043

Mailing Address
2455 E. SUNRISE BLVD.
STE 502
FT LAUDERDALE, FL 33043



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1301 Bayview Drive Suite, Apt. #, etc. 22 # 7 City & State 23 Ft. Lauderdale, FL Zip 24 33304		2a. Mailing Address 26 1301 Bayview Dr Suite, Apt. #, etc. 27 # 7 City & State 28 Ft. Lauderdale, FL Zip 29 33304		3. Date Incorporated or Qualified 05/21/1997	
				4. FEI Number 65-0754320	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent SCHNITZER, GERALD S 2455 E. SUNRISE BLVD. STE 502 FT LAUDERDALE FL 33043				10. Name and Address of New Registered Agent			
				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				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

Gerald Schnitzer

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP				1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			
D SCHNITZER, GERALD S 2455 E. SUNRISE BLVD. FT LAUDERDALE FL 33043				President Marilyn DeMartini 1301 Bayview Dr #7 Ft. Lauderdale, FL 33304			
☐ DELETE				☐ Change ☐ Addition			
2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP				2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			
3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP				3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			
4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP				4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			
5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP				5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			
6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP				6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			

14. I 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 officer 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marilyn DeMartini

CR2E034 (10/97)