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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000090356 (1)

EL MARISCO, INC.

Principal Place of Business

Mailing Address

FILED May 21 1998 8:00am Secretary of State



1617 NO FLAGLER DR STE 104 WEST PALM BEACH FL 33407	1617 NO FLAGLER DR STE WEST PALM BEACH FL 336		DO NOT WRITE IN THIS	S SPACE
			3. Date Incorporated or Qualified 10/20/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number -	Applied For
21	26			Not Applicable
	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the co	
	29 30	<u> </u>		Yes No
9, Name and Address of Current R	egistered Agent	81 Name	10. Name and Address of New Registered	Agent
VAN SCHEPEN, BRENDA D		81 Name		
' 1617 NO FLAGLER DR STE 104 WEST PALM BEACH FL 33407		82 Street Address (P.O. Box Number is Not Acceptable)		
		83		+
•		63		
		84 City	FI	85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 at office or registered agent, or both, in the State of f	Horida. Such cha nge was aut	horized by the corpo	orporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its registered
agent. Lam familiar with, and accept the obligation SIGNATURE	ns of, Section 60 7.0505, Floric	da Statutos.	. ,	,
Signature, typed or printed name of regetered agent as		egistered Agent signature re	equired when reinstating) DATE	
12. OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE OFFICE	L_] DEL€TE	1.1 TITLE		Change Addition
NAME Brenda D. Venscher	×v	1.2 NAME		
	0	1.3 STREET ADDRESS		
CITY-ST-ZIP Sup ter Pl. 3347		1.4 CITY-ST-ZIP		···
TITLE President	DELETE	2.1 TITLE		Change Addition
NAME Hector C. O	7 6 54	22 NAME		
STREET ADDRESS 1617 N. Flagler D	1 2/ 23462	2.3 STREET ADDRESS		
CITY-ST-ZIP WEST FILM BEACL	DELETE	2 4 CITY - ST - ZIP		[] Obacca
TIFLE	, CT DECEIE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP TIFLE	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME	المارين ليس	4. 2 NAME		C ought C Votition
STREET ADDRESS		4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		,
CITY-ST-ZIP		5 4 CiTY-ST-ZiP		
TITLE	DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME		62 NAME		- —
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 City-St-ZiP		
14. Thereby certify that the information supplied with II indicated on this annual report or supplemental an officer or director of the corporation or the receiver Block 12 or Block 13 if changed, or on an attachur	hual report is true and accura for trustee e <mark>mpowered to</mark> exe ent with an address.	ate and that my signa ocute this report as re	ature shall have the same lengt effect as if made u	nder oath; that I am an my name appears in