## 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 # P97000106301 (9)

## MARCRIS CORPORATION

FILED Feb 20 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					10/10/1101	Q(   Q    Q
928 HARBOUR HOUSE DRIVE 928 HARBOUR HOUSE DRIVE								
INDIAN ROCKS BEACH FL 33785 INDIAN ROCKS BEACH FL 3378					DO NOT WRITE IN	THIS SPAC	F	
					3. Date Incorporated or Qualified			· · · · · · · · · · · · · · · · · · ·
					12/18/1997			
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number		T <sub>Ac</sub>	plied For
21		26					<del></del>	t Applicable
Suite, Apt.		Suite, Apt. #, etc.	a	`	a Continue of Continue David	¬ \$8		Additional
22 928 HARBOUR HOUSE DRIVE 27 928 HARBOUR HO				e DelVé	5. Certificate of Status Desired		Fee Re	
City & State O O C City & Stale O					6. Election Campaign Financing	\$	5.00	May Be
23 IN XA		28 INDIAN KOCKS			Trust Fund Contribution			o Fees
Zip 24] 3378	Country	Zip 72278 (	Cont	LSA-	8. This corporation owes or has paid t			
24 55/8			30	V 24	Personal Property Tax due June 30			No
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Regis	terea Agen		
	IRTIN, JOHN P			INAME			-	
2310 WEST BAY DRIVE LARGO FL 33770				82 Street Add	fress (P.O. Box Number is Not Acceptable)			
	NGO FL 33/10		ļ	83				
				B4 City		85	Zip C	Code
							-	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State o	and 607.1508, Florida Statute of Florida, Such change was a	s, the ab	ove-named cor by the cornors	poration submits this statement for the purp	ose of chan	ging its	s registered
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flo	rida Statu	tes.	tion's board of directors. I hereby accept the	о арропил	,,,, <b>Q</b> O ,	108/0/0/0
SIGNATURE						<del> </del>		
12.	Signature, typed or printed name of registered agon OFFICERS AND		Registered	Agent signature requ	ired when reinstating) [ ADDITIONS/CHANGES TO OFFICER	DATE		0.151.40
TITLE	D OFFICERS AND	DIRECTORS	1.1 111	r I	ADDITIONS/CHANGES TO OFFICER	S AND DIRE		Addition
NAME	JOYCE, CHRISTINE		1.2 NAN				ango	LJ Addition
STREET ADDRESS	928 HARBOUR HOUSE DRIVE			EET ADDRESS				
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 33	785		(-SI-ZIP				
TITLE	MODELLI TOOKS DESCRITTE SO	DELETE	2.1 TITL			Пс	nange	Addition
NAME		<u></u>	2.2 NAN			٠,٠	ungo	7.00111071
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CITY-ST-ZIP								
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NAME			3.2 NAN				o y	
STREET ADDRESS				EET ADDRESS				ļ
CITY-ST-ZIP				Y-ST-ZIP				
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NAME			4. 2 NA			٠٠ <b>ت</b>	a. y	
STREET ADDRESS				EET ADDRESS				
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NAME			5.2 NAM	1		L 07	a.igu	
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				}				
TITLE	4	DELETE	6.1 TITL	-ST-ZIP		☐ Cr	anne	Addition
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STREET ADDRESS								Ĭ
CITY-ST-ZIP				ET ADDRESS				
VIII-DI-EIF			0.4 UIIY	-ST-ZIP				

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 afflactorient with an address.

---- PA Managari

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