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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000054606**1. Corporation Name

MARATHON COMPUTERS OF THE KEYS, INC.

Principal Place	e of Business	M	Mailing Address									
11400 OVERSEAS HIGHWAY			11400 OVERSEAS HIGHWAY									
SUITE 121			SUITE 121				[DO NOT WIDITE IN THE SPACE				
MARATHON SHORES FL 33052			MARATHON SHORES FL 33052				Ļ	DO NOT WRITE IN THIS SPACE				
							ŀ	 Date Incorporated or Qualified 06/17/1998 	_			
2. Principal P	lace of Business	2a	. Mailing Address					4. FEI Number	. ,	A	pplied For	
21			26				-	65-084430	4	N	ot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certifcate of Status Desired		\$8.75	Additional	
22			27					5. Certificate of Status Desired	<u> </u>	Fee R	Required	
City & State			City & State					6. Election Campaign Financing		\$5.00	May Be	
23			28					Trust Fund Contribution		<u>Added</u>	to Fees	
Zip	Country		Zip Cour				8. This corporation owes the current year Intangible			_		
24	25	29		30			1 Brooman roporty rate			□No		
	9. Name and Address of Currer	nt Regi	istered Agent				10. Name and Address of New Registered Agent					
					81	Name	е					
MILLER, ROBERT K					82	Street	eet Address (P.O. Box Number is Not Acceptable)					
2975 OVERSEAS HIGHWAY			l			000						
MAR	ATHON FL 33050				83						1	
					24	011				85 Zip	Code	
					84	City			FL	. 65 21	Code	
11. Pursuant	to the provisions of Sections 607.050	2 and	607.1508, Florida Statute	es, the a	bove	-name	d corpora	ation submits this statement for the	purpose of	changing it	s registered	
office or r	registered agent, or both, in the State im familiar with, and accept the obliga	of Flori	ida. Such change was at	uthonze	י עס כ	the cort	poration's	s board of directors. I hereby accep	t the appoi	ntment as r	egistered	
	im familiar with, and accept the obliga	ilions o	1, 360111111111111111111111111111111111111	ida otat	u103.							
SIGNATURE	Signature, typed or printed name of registered age	nt and title	e if apolicable. (NOTE:	Registered	l Agen	t signature	e required wi	hen reinstating)	DATE			
12.	OFFICERS AN							ADDITIONS/CHANGES TO OF	ICERS AN	ID DIRECT	ORS IN 12	
TITLE	D		☐ DELETE	1.1 TI	TLE		T			☐ Change	☐ Addition	
NAME	BUZZA, RICHARD P			1.2 N	AME							
STREET ADDRESS 11400 OVERSEAS HIGHWAY, SL			TE 121 1.3 ST			ADDRESS	is				Ì	
CITY-ST-ZIP	MARATHON SHORES FL 3305		1.4 C			r-ZIP						
TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>-</u>	☐ DELETE	2.1 T						Change	Addition	
NAME				2.2 N	AME						1	
STREET ADDRESS				1		ADDRESS	ای				1	
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CITY-ST-ZIP TITLE			□ DELETE	3.1 Ti		1.71				Change	☐ Addition	
				3.2 N						·	ļ	
NAME						ADDRESS						
STREET ADDRESS							~					
CITY-ST-ZIP			DELETE	4.1 T	ITY-S	i-ZIP				Change	Addition	
TITLE				•	IAME		1					
NAME				1		. LODDE A					,	
STREET ADDRESS					-	ADDRESS	~					
CITY-ST-ZIP			☐ DELETE	_	ITY-\$1	-ZIP				Change	Addition	
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NAME							.				{	
STREET ADDRESS						ADDRESS	100				ļ	
CITY-ST-ZIP					ITY-SI	I-ZIP				(Cha	- Addis	
TITLE			☐ DELETE	6.1 T	ILE					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, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

May 27, 1999 8:00 am Secretary of State

05-27-1999 90003 017 ***150.00

CR2E034 (11/98)