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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$23043

(0)

MAR-FLITE ASSOCIATES, INC.

FILED						
May 21 1998 8:00am	1					
Secretary of State						

Principal Place	of Business	Mailing Address				
1323 S.E. 17T		1323 S.E. 17TH ST.				
STE #156		STE. #156				
FT. LAUDERDALE FL 33316		FT. LAUDERDALE FL 33318	6	DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 01/07/1991		
2. Principal Pi	ace of Business	2a, Mailing Address		4. FEI Number Applied For		
21		26		65-0233308 Not Applicable		
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional		
22		27		5. Certificate of Status Desired Fee Required		
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be		
23	T. Constitution	28	Country	Trust Fund Contribution Added to Fees		
Zip	Country	2φ	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	25 S. Name and Address of Curren		30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
CI	CORPORATION SYSTEM		81 Name			
	O SOUTH PINE ISLAND DR.		82 Street Ac	ddress (P.O. Box Number is Not Acceptable)		
	NTATION FL 33324		oz Street Au	dutess (P.O. Box Number is Not Acceptable)		
	4		83			
			84 City	85 Zip Code		
				FL 1 1		
11. Pursuant t office or re	o the provisions of Soctions 607.050; ogi ste red agent, or both, in the State	2 and 607.1508, Florida Statutes of Florida. Such change was au	s, the above-named co thorized by the corpor	propration submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered		
agent. I ar	m famili ar with, and accept the obliga	itions of, Section 607.0505, Flori	ida Statutes.	, , , , , , , , , , , , , , , , , , ,		
SIGNATURE	Signature, typed or printed mane of migistered age	tot and Added discourage (ANOTE	Registered Agent signature re-	guired when reinstating) DATE		
12,	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	DELETE	1.1 TITLE	P/D Change Addition		
NAME	COHEN, JOHN			HASHMAN, SAMUEL		
STREET ADDRESS	1323 S.E. 17TH ST. #156			1323 S.E. 17th ST. #156		
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 City-St-ZiP	FT. LAUDERDALE, FL.		
TITLE	TSD	DELETE	2 1 TITLE	✓ P. Change		
NAME	SHEINMAN, CHERYL		22 NAME	COHEN, JOHN		
STREET ADDRESS	1323 S.E. 17TH ST. #156 FT. LAUDERDALE FL	,	2.3 STREET ADDRESS	1323 S.E. 17th ST. #156		
CITY-ST-ZIP TITLE	n	DELETE	■ Z. 4 D(11'-51-71P 1	FT. LAUDERDALE, FL. Change LAddition		
NAME	SHEINMAN, STEVEN	E) occirc	3.2 NAME	V Change La radinon		
STREET ADDRESS	1323 S.E. 17TH ST. #156			r/s/d		
CITY-ST-ZIP	FT. LAUDERDALE FL.			HASHMAN, DINA		
TITLE		DELETE	4.1 DTLE	323 S.E. 17th ST. #156 Change ☐ Addition		
NAME			4.2 NAME	FT. LAUDERDALE, FL.		
STREET ADDRESS			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 TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Change Addition		
NAME		E OFFIE	6.2 NAME	E Grienige E Addition		
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			64 CITY-ST-ZIP			
14. I hereby c	ertify that the information supplied wi	th 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 supplicatental 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.						