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

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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$42890

Country

(1)

Suite, Apt. #, etc.

City & State

MARI COMPANY, INC.

Suite, Apt. #, etc.

City & State

STREET ADDRESS

CITY-ST-ZIP

FILED
May 01 1998 8:00am
Secretary of State

8. This corporation owes or has paid the current year Intangible

Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be Added to Fees

Principal Place of Business	Mailing Address		
101 CENTURY 21 DR SUITE 101 JACKSONVILLE FL 32216	101 CENTURY 21 DR SUITE 101 JACKSONVILLE FL 32216	DO NOT WRITE IN THIS SPACE	
US	US	 Date Incorporated or Qualified 04/02/1991 	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For

Country

59-3058438

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

24	25	29	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Registered Agent	
	OTTINGER, MARIKO 385 CASSAT AVENUE			81 Name	Address (P.O. Box Number is Not Acceptable)	
	ACKSONVILLE FL 32205			Street	Centum 21 On	
	OHOWHILLE I B OLLOV			63	ite 101	
<u> </u>						
				J'A	cksonville FL 85 Zip Code 32216	
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 Signature, typed or profed name of registerns agent and title if applicable (NOT: Registered Agent signature required whon reinstating) OATE						
12.		AND DIRECTORS	13.	a rigina o griculare	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DEI		TLF	Change Addition	
NAME	MOTTINGER, MARIKO		1.2 N	AME		
STREET ADDRESS	1385 CASSAT AVENUE		1.3 S	IREET ADDRESS	101 Century 21 DR Suite 101	
CITY-ST-ZIP	JACKSONVILLE FL		1.4 C	TY-ST-ZIP	101 Century 21 DR Suite 101 JACKSONVILLE FL 32216-9255	
TITLE	VS	☐ DEI			Change Addition	
NAME	EDWARD C MOTTINGER		22 N	AME		
STREET ADDRESS	1385 CASSAT AVEN		2.3 S	TREET ADDRESS	101 CENTURY 21 On. Suite 101 JACKSONVILLE, FL 32216-9255	
CITY-ST-ZIP	JACKSONVILLE FL		2.40	ITY-ST-21P	JACKSONVILLE, FL 32216-9255	
TITLE		DEI	.ETE 3.1 TI	TLE	☐ Change ☐ Addition	
NAME			3.2 N	AME		
STREET ADDRESS			3.3 S	reet address		
CITY-ST-ZIP				ity-ST-ZiP		
TITLE		[□ DEI	ETE 4111	TLE	☐ Change ☐ Addition	
NAME	1		4. 2 N	AME		
STREET ADDRESS			4.3 S	TREET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		DE:	ETE 5.1 TI	TLE	☐ Change ☐ Addition	
NAME			5.2 N	AME		
STREET ADDRESS			5.3 S	ireét address		
CITY-ST-ZIP				TY - ST - ZIP		
TITLE		DEI	.ETE 6.1 To	TLE	☐ Change ☐ Addition	
NAME			6.2 N	AME		

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

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

EDWARD C MOTTE EDWARD C MOTTING ON 4-21-98 904-725-855