FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 S65256 **DOCUMENT #**

Mailing Address

M.A.R. AND ASSOCIATES, INC.

FILED Feb 09 1996 8:00 am Secretary of State



SUITE 212 7771 W. OAKLAND PARK BLVD. SUNRISE FL 33351		Suite 212 7771 W. Oakland Pap Sunrise FL 33351	7771 W. OAKLAND PARK BLVD.		3. Date Incorporated or Qualified 07/10/1991	3a. Date of Last Report 01/30/1995
2. Principal Pla	•	2a. Mailing Address		_	4. FEI Number	Applied For
			144460		65-0279572	Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.	27		5. Certificate of Status Desired Security Securi	
City & State	n: FL.	City & State 28 CoRAL 64. Zip	4/0,	FL.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
^{Ζφ} 24 <i>33/2 6</i>	Country 25 DADE	29 3 3114	30 D	ntry 406	8. This corporation has liability for i	
	9. Name and Address of Curre		130 <i>D</i> .	4 <i>9</i> 0	10. Name and Address of New R	
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		81 Name		
STEINBERG, ABBY L, P.A.				82 Street Addr	ress (P.O. Box Number is Not Acceptab	le)
	OAKLAND PARK BLVD. SUITE	131		Street Addr	ress (F.O. Box Normber is Not Acceptab	ie)
SUNRISE	E FL 33351			83		
				84 City		FL 85 Zip Code
familiar with	ed agent, or both, in the State of Flor in, and accept visited gations of, SM Signature, typed or prince hard of registers/laying	Ua. Such change was authorized tion 60 / 0595. Florida Statutes.	y L	orporation's boar Stunbu	ration submits this statement for the pur rd of directors. I hereby accept the appo	intment as registered agent. I am
12.		D DIRECTORS	13.	-der a signature red inte	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
111; F	D	☐ DECETE	1 1 11	'LF		Change Addition
NAME	RODRIGUEZ, MIKE A.	VD 4660 S.W. 15 57	1 2 NA	ME		
STHEET ADDRESS	7771-W-OAKLAND PARK BL			REET ADDRESS		
City-S1-7iP	SUNRISE FL	MiAMI, FL.33126		Y-ST-ZIP		
TITLE	DELETE		2 1 Tr		Change Addition	
NAM!			2 2 NA			
STREET ADDRESS CITY+ST-ZP				REET ADDRESS		
TILL	☐ DELETE		3 1 Tr	Y-ST-ZIP		☐ Change ☐ Addition
MAM:			32 NA			C Village C Addition
STREET ADDRESS			1	REET ADDRESS		
CHY-ST ZIP		— ·	3.4 CIT	Y·ST-ZIP		
TILLE	☐ DELETE 4		4. 1 Ti	LF		Change Addition
NAMt			4 2 NA	ME		
STREET ADDRESS				REET ADDRESS		
CON-SI ZIP		DELĒTE		Y-ST-ZIP		
NAME			5 1 T)			Change Addition
STREET ADDRESS			52 NA	ME MEET ADDRESS		
CHY-ST-ZIF				Y-SI-ZIP		
Dist		DELETE	6 1 Til			Change Addition
NAME			6 2 NA			E) our Ro
STREET ACORESS				REET ACIDRESS		
OLLA ST-ZIS				Y-ST-ZIP		

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental a finual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the opporation of the receiver or fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cylonged, or on any state hydrogy.

SIGNATURE:

Misuel A. Rodnisusz 1-24.81