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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997

TITLE

STREET ADDRESS

14. I do hereby certify that the information supplied with the information indicated on this annual leport or supplement a man officer or director of the comporation or the rest



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S75340

MARQUETTE HOLDING CO. NUMBER ONE

(7)

## **FILED** Apr 29 1997 8:00am Secretary of State

Change

Addition

Principal Place of Business 832-834 DYER AVE CRANSTON RI 02920 US		Mailing Address 832-834 DYER AVENUE CRANSTON RI 02920-6714 US				
				3. Date Incorporated or Qualified 08/23/1991	3a. Date of Last Report 04/11/1996	t
<b>-</b> - '	Place of Business	<b>2a.</b> Mailing Address		4. FEI Number	Applied	
21 Suite, Apt.	# Alc	26   Suite, Apt. #, etc.		05-0462117		plicable
22		27	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	\$8.75 Additi	
City & Stat		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Added to Fe	
Zip <b>24</b> ]	Country <b>25</b>		Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199 Yes 🔲 No	.032,
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Reg	stered Agent	
DANIELS, STEVEN L. 301 YAMATO ROAD, #4150 BOCA RATON 33431			81 Name 82 Street Add	ect Address (P.O. Box Number is Not Acceptable)		
			B4 City		FL 85 Zip Code	<del></del>
SIGNATURE	Signature, typed or printed name of registered a		Registered Agent signature requ		DATE	
12.	OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC		
NAME	ULRICH, HENRY T	L. DELLIE	1.1 1111.6		Change	Addition
STREET ADDRESS	832-834 DYER AVE.		1.2 NAME 1.3 STREET ADDRESS			
CITY-ST-ZIP	CRANSTON RI		1.4 CHY+S1-ZIP			
TITLE		DELETE	2 1 TILLE		Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2 4 CITY - ST - ZIP			
TITLE		☐ DELETE	3 1 TINUE		Change	Addition
NAME STREET APPROCES			3 2 NAME			
STREET ADDRESS CITY-ST-ZIP			3 3 STHEET ADDRESS			
TITLE		DELETE	3.4. CHY+S1+Zif* 4.1 TiTLE		Change	Addition
NAME		least	4. 2 NAME		Contaigo [1]	. southern
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIF			
TITLE		☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 C(1Y - \$1 - ZIP			

6.3 STREET ADDRESS 6.4 CITY-ST-7IP

ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the innual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6 1 THLE

6.2 NAME

DELETE