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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

. Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S81743

(4)

MARLIN APARTMENTS MOTEL, INC.

FILED	
Jun 18 1997 8:00am	Ì
Secretary of State	

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Principal Place of Business Mailing Address							
811 NEBRASKA HOLLYWOOD F	ST. L 33019	311 NEBRASK HOLLYWOOD	A ST. FL 33019-3440				
						3. Date Incorporated or Qualified 09/20/1991	3a. Date of Last Report 05/01/1996
2. Principal P	lace of Business	2a. Mailing A	ddress			4. FEI Number 65-0286830	Applied For Not Applica
Sulte, Apt.	#, etc.	Suite, Apt	#, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & Sta	ile			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Z ip	30	Country		This corporation has liability for Florida Statutes	ntangible tax under s. 199.032] Yes □ No
	9. Name and Address of Cur-		nt	'		10. Name and Address of New Re	
CAM	IRE, MARIO LUC			81	Name		
	NEBRASKA ST.			62	Circot Ad	day (D.O. Day N	
	LYWOOD FL 33019			62	Street Ao	dress (P.O. Box Number is Not Acceptab	ie)
•				83			
				84	- City		
					City		FL 85 Zip Code
11. Pursuant to office or re	to the provisions of Sections 607.0 agistered agent, or both, in the Sta	0502 and 607.1508, Fi ate of Florida. Such ch	orida Statutes, t nange was auth	he above orized by	named co	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its register
SIGNATURE							
	Signature, typod or printed name of registered		(NOTE: Re		nt signature req	uired when reinstating)	DATE
12.	D OFFICERS A	AND DIRECTORS	DELETE	13.	1	ADDITIONS/CHANGES TO OFFIC	
NAME	CAMIRE, MARIO LUC		DECETE	11 TITLE			Change Addi
STREET ADDRESS	311 NEBRASKA ST.			1.2 NAME			
Offy-ST-ZIP	HOLLYWOOD FL 33019			1.3 STREET			
TITLE		III	DELETE	1.4 CITY - ST 2.1 TITLE	- ZIP'		Change Addil
NAME			5227.6	2.2 NAME			Lad Onlaringe And Addition
STREET ADDRESS				2.3 STREET	ADDRECC	•	
CITY-ST-ZIP			Ī	2.4 CITY-S	1		
TITLE			DELETE	3.1 TITLE	· · · · ·		Change Addit
NAME				3.2 NAME			
STREET ADDRESS				3 3 STHEET	ADDRESS		
CITY-ST-ZIP				3.4. CITY - S	1 - ZiP	•	
TITLE			DELETE	4.1 TITLE			Change Addil
· NAME			l	4. 2 NAME		50000221 -06/18/970111	6515
STREET ADDRESS			[4.3 STREET .	ADDRESS	-06/18/970111	UU29
CITY-ST-ZIP				4.4 CITY - ST	- ZIP	***165.00	1, ,
TITLE			DELETE	5.1 TITLE			Change Addit
NAME				5.2 NAME		4/-	1/1/1/10.
STREET ADDRESS				5.3 STREET A	ADDRESS		101 1819)
CITY-ST-ZIP			DE1 515	54 CITY - ST	- ZIP		41 101 17
TITLE		L		61 TITLE		•	☐ Change ☐ Addit
NAME				6.2 NAME	- [
STREET ADDRESS				6.3 STREET /	LDDRESS		
CITY-ST-ZIP	y carlify that the information suppl			6.4 CITY-ST	- ZIP		

4. I do 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 trusted 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 exemptation with an address.

CALATURE WATER OF