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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V47098

(1)

MARVIN	N ENTERPRISES, INC.				
3805 BROADWAY 3805 BROADW		Mailing Address 3805 BROADWAY W PALM BEACH FL 33407	7-4320	T TO SET	1. 5.1617 81817 81615 61617 61617 61617 4 64 7
				3. Date incorporated or Qualified 06/25/1992	3a. Date of Last Report 05/01/1996
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0343056	Not Applicable
Suite, Apt #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30	Florida Statutes	່ງYes 🔼 No
DAT	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Ro	egistered Agent
PATEL, MANOJ					
3805 BROADWAY W PALM BEACH FL 33407			82 Street Ad	dress (P.O. Box Number is Not Accepta	ble)
** '	ALM DENOTT I COTO		83		
			94 (0)		
			84 City		FL 85 Zip Code
11. Pursuarit office or i agent 1 a	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the obj	502 and 607.1508, Florida Statut ite of Florida. Such change was a ligations of, Section 607.0505, Ffc	es, the above-named co authorized by the corpor orida Statutes.	rporation submits this statement for the ation's board of directors. I hereby acce	ourpose of changing its registered pt the appointment as registered
SIGNATURE	Signature typed or printed rian eight registered	agent and little if applicable (NOTI	E: Peg stered Agent signature req	uirad when rainslating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
THE	D	DELETE	1.1 TITLE		Change Addition
NAME	Patel, Manoj		1.2 NAME		
STREET ADDRESS	3805 BROADWAY		1.3 STREET ADDRESS		
City-St-7/P	W PALM BEACH FL		14 CITY-ST-ZIP		
ŦTLF		DELETE	2 1 TITLE		Change Addition
NAME			22 NAME .		
STREET ADDRESS			23 STREET ADDRESS		
CHY-SI-ZIF		T or cre	2 4 CITY-ST-ZIP		
TITLE		L) DELETE	31 TITLE	•	Change Addition
NAME STORE CARADODESIS			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
COLY-ST-ZOP TOTLE		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	······································	☐ Change ☐ Addition
NAME			4. 2 NAME		Change (Abortion
STREET ADURESS			4.3 STREET ADDRESS		
CITY-ST-ZIF			4.4 CITY - ST - ZIP		
TOLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
0:1Y - ST - 7/P			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		-
STREET ADDRESS			6.3 STREET ADDRESS		
	1				

SIGNATURE:

14. I do hereby certify that the information supplied with this filling 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 circular 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.

561-8485548

FILED

Mar 03 1997 8:00am

Secretary of State