

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V58290 (0)

1. Corporation Name

FLORIDA MARLINS OF BREVARD, INC.



Principal Place of Business

2267 NW 199TH ST.
MIAMI FL 33056

Mailing Address

2267 NW 199TH ST.
MIAMI FL 33056

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

08/18/1992

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0354089

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.
801 BRICKELL AVE
24TH FLOOR
MIAMI FL

10. Name and Address of New Registered Agent

81 Name
American Information Services, Inc.
82 Street Address (P.O. Box Number is Not Acceptable)
1 SE 3rd Avenue
83 27th Floor
84 City
Miami FL 85 Zip Code
33131

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 printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
	CEO	HUIZENGA, H WAYNE	ONE BLOCKBUSTER PLAZA FT LAUDERDALE FL	<input type="checkbox"/>
	VS	ANDERSEN, RICHARD L	2267 NW 199TH ST MIAMI FL 33056	<input checked="" type="checkbox"/>
	V	DOMBROWSKI, DAVID M	2267 NW 199TH ST MIAMI FL 33056	<input type="checkbox"/>
	VTS	MARINER, JONATHAN D	2267 NW 199TH ST. MIAMI FL 33056	<input type="checkbox"/>
	P	SMILEY, DONALD A	2267 NW 199TH ST. MIAMI FL 33056	<input type="checkbox"/>
	D	ROCHON, RICHARD C	200 SOUTH ANDREWS AVE. 6TH FLOOR FT. LAUDERDALE FL 33301	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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-05/08/96--01006--007
***400.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD C ROCHON 4/25/96 954 627 5000

Date

Daytime Phone #

CR2E034 (12/95)