SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$226 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # K30556

(0)

2001 MARATHON, INC.

Principal Place of Business

Mailing Address

FILED Jun 18 1997 8:00am Secretary of State

IMPLEMENTATIONS OF THE PROPERTY OF THE PARTY

	DARFELD DESC.	Condition Condition	
1 10011011 000	COLOR MALON BUILDS (COLOR D	NER BUREL BUREL BUREL BE	(B)() (B)(B)() (B)() (B)()
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10 DI DI FI EDI	FFLET BOTOL BETOL BILLE 1	1831 4 6 1 12 13 14 14 14 14 14 1	

rinciparriaci	6 OI DUSII 1085	Maning Address			
	ean dr. Beach Fl 33051	P.O. BOX 299 KEY COLONY BEACH FL	33051		
US				3. Date Incorporated or Qualified 08/09/1988	3a. Date of Last Report 03/09/1995
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 6000	1 DE 20 d 5T	26		65-0118686	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 スス		27		5. Certificate of Status Desired	Fee Required
City & State	SNA FI	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032,
24 330		 ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	30	Florida Statules	Yes No
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Re	gistered Agent
201	OWN, L. E. I E. OCEAN DR. Y COLONY BEACH FL 33051		81 Name 82 Street 6 0 83 0 84 City	Nu YA MAS AMPA Address (POYBox Numfjer is Not Acceptab — N. R. 1, N. R. 3	3004 FL 85 Zip Code
11. Pursuant to office or reagent. I ar	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of mylamilian with, and accept the obligation	and 607.1508, Florida Statute Florida. Such change was at ons of, Section 607.0505, Flor	s, the above-named uthorized by the corp rida Statules,	corporation submits this statement for the pu oration's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE	Signature typed or printed name of registered rigority	amer	Ruth M E-Registered Agent signature	ADDONER	3710117 DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PST	DELETE	1.1 TITLE	Fresonort	Change Addition
NAME	MAGZAMER, JUDITH		. 1.2 NAME	JUDISH MARKAHOL	
STREET ADDRESS	201 E. OCEAN DR.		1.3 STREET ADDRESS	604nie mlst	
CITY-ST-ZIP	KEY COLONY BEACH FL 3305		1.4 CITY - ST - ZIP	DAN'IA F & 35004	
Are	m . M 6 . 1 14	DELETE	2.1 TITLE		Change Addition
NAME	in the sound on I have the	•	2.2 NAME		
STREET ASSMESS	604 NA NA 61		23 STREET ADDRESS	arra arra arra arra arra arra arra arr	31 PEED4
CITY-ST-ZIP	17ANIK, 101 330	04	2 4 CITY - ST - ZIP	8000023	210-20110-10
TITLE	1	DELETE	3.1 TITLE		io.oo!*****256.000
NAME			3.2 NAME		0,00
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - S1 - ZIP		
TITLE		DELETE	4.1 TITLE	\	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	11	Change Addition
NAME			5.2 NAME	\sim \sim \sim \sim	∕ 1
STREET ADDRESS			5.3 STREET ADDRESS	1	(
CITY-ST-ZIP			5.4 CITY - ST - ZIP	1-10	
TITLE		DELETE	6.1 TITLE	6	Change Addition
NAME .			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		
further cer made und	riify that the information indicated on the	is annual report or suppleme of the corporation or the rece	ntal annual report is t iver or trustee empov	qualify for the exemption stated in Section 1 rue and accurate and that my signature shall vered to execute this report as required by C	have the same legal effect as if