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 # 679642

(9)

TEMPLE MARKETING, INC.

Dringing Diag	o of Buringes	Mailing Address					
Principal Place of Business 2010 NE 31ST CT UGHTHOUSE POINT FL 33064 US 2. Principal Place of Business		2010 NE 31ST CT	2010 NE 31ST CT LIGHTHOUSE POINT FL 33064-7654				
					Date Incorporated or Qualified 07/23/1980	3a. Date of Le 03/21/199	,
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2035501		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	1 1	75 Additional ee Required
City & Stat	е	City & State			Election Campaign Financing Trust Fund Contribution	Pro-101	.00 May Be Ided to Fees
Zφ	Country	Zip	Cou	ntry	8. This corporation has liability for	intangible tax unc	der s. 199.032,
24	25	29	30			Yes No	
	g. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Re	gistered Agent	
	IPLE, HARRY E			81 Name			
2010 NE 31ST CT				82 Street A	ddress (P.O. Box Number is Not Accepta	ołe)	
LIGH	ITHOUSE PNT FL 33064			83	······································		····
				B4 City		F1 85	Zip Code
office or a	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the oblig	e of Florida. Such change wa	s authorizad	d by the corp	corporation submits this statement for the oration's board of directors. I hereby acce	ourpose of chang pt the appointmen	ing its registered at as registered
SIGNATURE	Signature, Typest or printed name of registered ag	pant pod title i apoliceble (A)	OTF Receivered	d Anent signature	equired when reinstating)	DATE	
12.		VD DIRECTORS	13.	a Agent alguatore	ADDITIONS/CHANGES TO OFFI		CTORS IN 12
TitleF	P	☐ DELETE	1.1 7/	TLE		☐ Cha	
NAME	TEMPLE, HARRY E.		1.2 N	AME			
STREET ADDRESS	2010 NE 31ST CT		1.3 \$1	TREET ADDRESS			
CITY-SE ZIP	LIGHTHOUSE POINT FL		1.4 0	TY-ST-ZIP			
TOLE		DELETE	2.1 TI	TLE .		☐ Cha	ange Addition
NAMÉ			2.2 N	AME			
STREET ADDRESS			2.3 \$1	FREET ADORESS			
CITY - S1 - ZIF			2.40	ITY-ST-ZIP			
THILE		DELETE	3.1 71	TLE		L Cha	ange L Addition
NAM5			3.2 N	AME			
STREET ADDRESS			3.3 S1	REET ADDRESS			
CITY - S1 - 7/P		- I briefe		ITY-ST-ZIP		T 1.05	
TITLE		☐ DELETE	4,1 T(L_1 Cha	ange Addition
NAM8			4. 2 N				
STREET ADDRESS				FREET ADDRESS			
CHY-S1-24P		DELETE		TY-ST-ZIP		Cha	ange Addition
TIDLE		☐ OELETE	5.1 TI			0116	nillo 🗀 Vanition
NAME:			5.2 N				
STREET ADDRESS				IREET ADDRESS			
COTY - ST - ZIP		☐ DELETE		TY-ST-ZIP		Cha	ange Addition
TILLE		רו מנונונ	6.1 TH	ŀ		Clia	ange CT MODINI
NAME:			6.2 N	1			
STREEL ADDRESS	I		6.3 S	freet address			

14. 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block

6.4 CITY-ST-ZIP

SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Apr 17 1997 8:00am

Secretary of State