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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 681007

1. Corporation Name
THE FIRST NATIONAL MARKETING GROUP OF FLORIDA, I NC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: C/O JOHN B DA GROSA SR, 76 YACHT CLUB PL, TEQUESTA FL 33469-1948
 Mailing Address: C/O JOHN B DA GROSA SR, 76 YACHT CLUB PL, TEQUESTA FL 33469-1948

3. Date Incorporated or Qualified: 08/05/1980
 4. FEI Number: 59-2019616
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing: \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business: 21 360 FIESTA AVE., 22 212, 23 TEQUESTA, FL, 24 33469, 25 USA
 2a. Mailing Address: 26 P.O. Box 2384, 27, 28 JUPITER, FL, 29 33468, 30 USA

9. Name and Address of Current Registered Agent
 DA GROSA, JOHN B SR
 76 YACHT CLUB PL.
 TEQUESTA FL 33469-1948

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable): 360 FIESTA AVENUE
 83 SUITE 212
 84 City: TEQUESTA, FL 85 Zip Code: 33469

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT/OWNER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DA GROSA, THERESA KULESZ	1.2 NAME	P.O. Box 2384
STREET ADDRESS	76 YACHT CLUB PLACE	1.3 STREET ADDRESS	JUPITER, FL 33468-2384
CITY-ST-ZIP	TEQUESTA, FL 00000	1.4 CITY-ST-ZIP	
TITLE	DP <input checked="" type="checkbox"/> DELETE	2.1 TITLE	
NAME	DA GROSA, JOHN B, SR	2.2 NAME	
STREET ADDRESS	76 YACHT CLUB PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA, FL 00000	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not claim 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 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _____ President 561-744-8142
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)