

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F80584

FILED  
Apr 11, 2007  
Secretary of State

Entity Name: UNITED MARKETING, INC.

## Current Principal Place of Business:

7003 N. WATERWAY STE 203  
MIAMI, FL 33155

## New Principal Place of Business:

1925 BRICKELL AVE  
D-TH 18  
MIAMI, FL 33129

## Current Mailing Address:

7003 N. WATERWAY STE 203  
MIAMI, FL 33155

## New Mailing Address:

1925 BRICKELL AVE  
D-TH18  
MIAMI, FL 33129

FEI Number: 59-2202782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GOMEZ, BARBARA M  
7003 N. WATERWAY, SUITE 203  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

GOMEZ, BARBARA M  
1925 BRICKELL AVE  
D-TH18  
MIAMI, FL 33129 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

04/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete  
Name: GOMEZ, BARBARA M  
Address: 7003 N. WATERWAY, SUITE 203  
City-St-Zip: MIAMI, FL 33155

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change ( ) Addition  
Name: GOMEZ, BARBARA M  
Address: 1925 BRICKELL AVE. D-TH18  
City-St-Zip: MIAMI, FL 33155

Title: VP ( ) Change (X) Addition  
Name: GOMEZ, RODOLFO  
Address: 1925 BRICKELL AVE. D-TH18  
City-St-Zip: MAIMI, FL 33129

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA M GOMEZ

PTS

04/11/2007

Electronic Signature of Signing Officer or Director

Date