## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## May 18, 2005 08:00 AN **Secretary of State** DOCUMENT # P00000099221 1. Entity Name TS MARKETING PRINTING & ADVERTISING SPECIALTIES, INC. Principal Place of Business Mailing Address 4799 COCONUT CREEK PARKWAY, #114 4799 COCONUT CREEK PARKWAY, #114 COCONUT CREEK, FL 33063 COCONUT CREEK, FL 33063 05132005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1049024 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CRUZ, MARIA C DO NOT WRITE 3050 NW 42 AVE **APT 209** IN THIS SPACE COCONUT CREEK, FL 33066 8. 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. I am lamiliar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when minstaling) DATE 9. Election Campalgn Financing **\$5.00** May Be FILE NOWILL FRE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 7, 2005 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS **PSD** THIE NAME CRUZ, MARIA CLEIDA S U00000367516 05/18/05-80006-009 150.00 STREET ADDRESS 3050 NW 42ND AVENUE, #209 CITY - ST - ZIP COCONUT CREEK, FL 33066 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MILE NAME STREET ADDRESS CITY-ST-ZIP me MAME STREET ADDRESS CATY-ST-ZIP

12. I heroby 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 report or supplemental 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 10 or Block 11 if changed, or on an attaginent with an addigest, with all other like empowered. of the corporation or the changed, or on an atta

SIGNATURE:

MLE NAME STREET ADDRESS

05-12-05

**FILED**