

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000085951 1. Entity Name EFFECTIVE MARKETING SOLUTIONS, INC.		
Principal Place of Business 6186 NW 53 CIRCLE CORAL SPRINGS, FL 33067	Mailing Address 6186 NW 53 CIRCLE CORAL SPRINGS, FL 33067	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WESTBERG, CHRISTINA 6186 NW 53RD CIRCLE CORAL SPRINGS, FL 33067		DO NOT WRITE IN THIS SPACE
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 familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE _____
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000147360 05/03/04-80102-024 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P WESTBERG, CHRISTINA 6186 NW 53 CIRCLE CORAL SPRINGS, FL 33067	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP MUNOZ, RITA 5511 NW 50 AVENUE COCONUT CREEK, FL 33073	
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12. I 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 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 attachment with an address, with all other like empowered.		
SIGNATURE: <u>Christina Westberg</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/29/04 Date Daytime Phone #