FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1996		DIVISION O	etary of Stat F CORPOR		IS				
DOCUMENT # S00217 (7)						· · · · · · · · · · · · · · · · · · ·				
· ·	MARKETING, I	NC.								
Principal Place o	of Business		Mailing Address					HRII (BRI 8181) B	FAIR UNUN DI	DIN BABAN DIANG INDE
388 \$. ATL	ANTIC AVE BCH FL 32176		388 S. ATLANTIC : ORMOND BCH FL							
US	OH VE GETTO		US	02110			3. Date Incorporated or Qualified	3a. Date	of Lest B	9004
							07/09/1990		01/27/1	
2. Principal Plac 1	ಂ of Business	26	a. Mailing Address				4. FEI Number 59-3066570			Applied For Not Applicable
¹ Suite, Apt. # 2	, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
City & State			City & State				6. Election Campaign Financing			Required May Be
3] Zp	Cou	into/	Zip		unlry		Trust Fund Contribution	<u> </u>	Adde	d to Fees
4	25	29	٦.	30	Cr III y		8. This corporation has liability for Florida Statutes	intangible ta INo	Cunder S	199.032,
	9. Name and Ad	dress of Current Reg	istered Agent		81	NI	10. Name and Address of New I	Registered A	gent	
MADDE	EN, MARGO					Name 				
	ATLANTIC AVE				82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		
	ND BCH FL 3217	6			83					
					84 (City			85 Zij	p Code
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certity triat the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or display or of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name applicars in Block 12 or Block 13 my langed, or on an attachment with an address.

GNATURE:

Signature and that the indicate and that my signature shall have the same logal effect as if made under oath; that I am an officer or display or of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name applicars in Block 12 or Block 13 my langed, or on an attachment with an address.

SIGNATURE: