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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

(3)

DOCUMENT # P06350 (3) 1. Corporation Name SUNBELT MARKETING OF GEORGIA, INC.							
Principa! Place 610 WATERF ATLANTA GA	FRONT DR., S.W.	Maling Address 610 WATERFRONT DR., S.W. ATLANTA GA 30336				RI BONI OLDIL DIBIN DI	1817 81811 81811 81811 <del>1</del> 881
					Date Incorporated or Qualified     06/07/1985	3a. Date of L	ast Report 11/1995
2. Principal Pla	ice of Business	2a. Mailing Address	·/		4. FEI Number		Applied For
21	L Ala	26			58-1460345		Not Applicable
Suite, Apt. #, etc. Suite. Apt. #, etc. 27			u.		5. Certificate of Status Desired	□ <b>\$</b>	8.75 Additional Fee Required
City & State		City & State	Orly & State		6. Election Campaign Financing		\$5.00 May Be
23		28			Trust Fund Contribution		Added to Fees
Ζιρ <b>24</b>	Country 25	Ζφ <b>29</b>	Countr 30	ry	8. This corporation has liability for Florida Statutes	intangible tax un	ider's 199.032,
	g. Name and Address of Current	Registered Agent			10. Name and Address of New F	legistered Age	nt
			8	1 Name			
	RPORATION SYSTEM		8:	2 Street Addr	ress (P.O. Box Number is Not Acceptab	Ne)	
1200 S. PINE ISLAND ROAD PLANTATION FL 33324				83			
PLANTA	TION PL 33324		0.	3			
			84	4 City		FL 8	5 Zip Code
or registere	ed agent, or both, in the State of Florida	i Such change was a if	tatutes, the above horized his the cor	enameu corpor maratian's has	ration submits this statement for the pur	pose of changin	stand agont Law
or registere familiar with SIGNATURE 2 2 3	ed agent, or both, in the State of Florid- n, and accept the obligations of, Section Signature, build of processorate of register Enjoyeta OFFICERS AND	i. Such change was auf n 607,0505, Florida Stal althoda, smadé DIRECTORS	horized by the cor	poration's bos	ro of directors. Thereby accept the app	ointment as régi DATE	stered agent. Lam
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ceruity trial the information indicated on this animal report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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 or changed or in an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED ORIGINITED NAME OF SIGNING OFFICER OR DIRECTOR