

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90115 008 ***150.00

DOCUMENT # G75008

1. Corporation Name

GENESIS MARKETING GROUP, INC.

Principal Place of Business

11644 SW 75TH CIR
OCALA FL 34476
US

Mailing Address

11644 SW 75TH CIR
OCALA FL 34476
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/19/1983

4. FEI Number

59-2379730

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

MUCZKO, JOAN
11644 SW 75TH CIR
OCALA FL 34476

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE PD
NAME MUCZKO, JOAN
STREET ADDRESS 11644 SW 75TH CIR
CITY-ST-ZIP Ocala FL

☐ DELETE

TITLE VC
NAME MUCZKO, JOHN
STREET ADDRESS 11644 SW 75TH CIR
CITY-ST-ZIP Ocala FL

☐ DELETE

TITLE VTD
NAME MUCZKO, A. CRAIG
STREET ADDRESS 3629 BANK CIRCLE
CITY-ST-ZIP PLANO TX

☐ DELETE

TITLE VSD
NAME MUCZKO, WILLIAM J.
STREET ADDRESS 1309 WINNIPEG DR
CITY-ST-ZIP LEWISVILLE TX

☐ DELETE

TITLE VD
NAME MUCZKO, GARY A.
STREET ADDRESS 3311 ELM ST. APT 219
CITY-ST-ZIP DALLAS TX 75226

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

603 EAGLE NEST LANE
ALLEN TX 75013

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joan Muczko
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/99

352-854-1676

Date

Daytime Phone #

CR2E034 (1/98)