


**FILED**  
**Jul 08, 1999 8:00 am**  
**Secretary of State**

07-08-1999 90023 023 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

P97000069082 ✓

AMERICAN ON HOLD MARKETING INC

Principal Place of Business

Mailing Address

901 SOUTH STATE RD 7 SUITE 240 HOLLYWOOD, FL. 33023

2. Principal Place of Business

1 901 SOUTH STATE RD 7

Suite, Apt. #, etc.

2 SUITE 240

City &amp; State

3 HOLLYWOOD FL

Zip

4 33023

Country

25 BROWARD

2a. Mailing Address

26 901 SOUTH STATE RD 7

Suite, Apt. #, etc.

27 SUITE 240

City &amp; State

28 HOLLYWOOD, FL

Zip

29 33023

Country

30 BROWARD

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4. FEI Number

65-0786364

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

MICHAEL J. DOMINIC

478 SE. 114 TERRACE

DANIA BEACH, FL. 33004

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 

(NOTE: Registered Agent signature required when reinstating)

DATE

6-30-99

12. OFFICERS AND DIRECTORS

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY-STATE-ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY-STATE-ZIP

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY-STATE-ZIP

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-30-99

Date

954-989-0115

Daytime Phone #

CR2E034 (11/98)