FILED May 12, 2002 8:00 am Secretary of State

2002 Uniform Business Report (UBR)

DOCUMENT # PC1000118336 1. Entity Name LAW MARKETING & MANAGEMENT, INC.				Secretary of State 04-03-2002 90041 044 ***150.00
1018 LAKE B	ce of Business BELL DR. K.FL 32789-1806	Mailing Address 1016 LAKE BELL DR. WINTER PARK FL 32789-1	808	E PERSONAL DE LE SERVICIO DE LA PERSONAL DE LA PERS
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State		City & State		4. FEI Number Applied For O 4-35 88272 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current F	legistered Agent		7. Name and Address of New Registered Agent
			Nama	
TIERNEY, MICHAEL P			- Street Addres	ss (P.O: Box Number is Not Acceptable)
	above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.			
Tax filing ((See criter	Signature, typed or printed name of registered egent ar cration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW!! After May 1, 200 Make Check Payebl	Pegistered Agent algorature regul PEE IS \$150.00 Pee will be \$550.00 e.to Department of S	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
11.	OFFICERS AND D		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE ' NAME' STREET ADDRESS CITY-ST-ZIP	D TIERNEY, MICHAEL P 1016 LAKE BELL DR. WINTER PARK FL 32789-1806	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
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NAME STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	☐ Delete	NAME STREET ADDRESS	☐ Change ☐ Addition
13. 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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an all accurate with an other like empowered. SIGNATURE: Date D				