2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# 265853

Entity Name: MARK MASTER, INC.

Current Principal Place of Business:

11111 N 46TH ST
TAMPA, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

11111 N 46TH ST
TAMPA, FL 33617 US

New Mailing Address:

FEI Number: 59-0994341 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OWENS LAW GROUP, PA
% JEAN OWENS
811-B CYPRESS VILLAGE BLVD.
RUSKIN, FL 335736724 US

Name and Address of New Registered Agent:

OWENS LAW GROUP, PA
JEAN OWENS
811-B CYPRESS VILLAGE BLVD.
RUSKIN, FL 335736724 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 04/27/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: GOVIN, JUDY
Address: 6821 BLUFFS BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: CD ( ) Delete
Name: GOVIN, RONALD
Address: 6821 BLUFFS BLVD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: PD ( ) Delete
Name: GOVIN, MARK R
Address: 18015 KINGS PARK DR
City-St-Zip: TAMPA, FL 33647

Title: DVP ( ) Delete
Name: GOVIN, K.A.
Address: 302 ROYAL PALM WAY
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN GOVIN DVP 04/27/2009
Electronic Signature of Signing Officer or Director — Date