

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 25, 1999 8:00 am
Secretary of State

04-25-1999 90050 036 ***150.00

DOCUMENT # 279030

1. Corporation Name

MARKETING & RESEARCH SERVICES INC

Principal Place of Business

151 SE 15TH RD.
FLOOR 10
MIAMI FL 33129-1247

Mailing Address

151 SE 15TH RD.
FLOOR 10
MIAMI FL 33129-1247

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/02/1964

4. FEI Number

59-1154966

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

9. Name and Address of Current Registered Agent

MORSE, IRWIN S.
BRICKELL EAST, FL 10, 151 SE 15TH RD.
MIAMI FL 33129

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)

4.19.99

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	MORSE, IRWIN	151 S.E. 15TH ROAD, 10 FLOOR	MIAMI FL	<input type="checkbox"/>
SD	JOHNSTON, F.B.	10901 CARROLLWOOD DRIVE	TAMPA FL	<input checked="" type="checkbox"/>
PD	MORSE, IRWIN S	151 SE 15 RD 10 FLR	MIAMI FL	<input type="checkbox"/>
D	KNUDSEN, HAROLD F	RT 13 BOX 478	HENDERSONVILLE NC	<input checked="" type="checkbox"/>
D	JOHNSTON, F B	10901 CARROLLWOOD DR.	TAMPA FL	<input checked="" type="checkbox"/>
T	GIANNONE, GLORIA	10500 SW 42 TERRACE	MIAMI, FL 00000	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
SD	JOHNSTON F.B.	10901 CARROLLWOOD DRIVE	TAMPA, FL	<input type="checkbox"/>	<input type="checkbox"/>
D	HAROLD F. KNUDSEN	RT 13 BOX 478	HENDERSONVILLE N.C.	<input type="checkbox"/>	<input type="checkbox"/>
D	JOHNSTON, F.B.	10901 CARROLLWOOD DR.	TAMPA, FL	<input type="checkbox"/>	<input type="checkbox"/>
T	GIANNONE, GLORIA	10500 SW 42 TER	MIAMI, FL	<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/99

Date

305-577-0592

Daytime Phone #

CR2E034 (1/1998)