

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 AM 11:43

DOCUMENT # **444627** (4)

1. Corporation Name

PRODUCTIVE MARKETING CONSULTANTS, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business 4367 NO. FED. HWY., SUITE 207 FT. LAUDERDALE FL 33308	Mailing Address 4367 NO. FED. HWY., SUITE 207 FT. LAUDERDALE FL 33308
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3. Date Incorporated or Qualified 01/23/1974	3a. Date of Last Report 04/22/1994
4. FEI Number 59-1509742	Applied For <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$6.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**POTTER, DORIS M.
4367 NO. FEDERAL HWY.
FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 _____ (DATE) _____
(Signature) (Agent or person named registered agent or not applicable) (Print) (Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	SD
NAME	POTTER, DORIS M
STREET ADDRESS	48 PLEASANT HILL LANE
CITY, ST, ZIP	FT LAUDERDALE, FL 00000
TITLE	D
NAME	CASE, CY J
STREET ADDRESS	4509 POINCIANA ST
CITY, ST, ZIP	FT LAUDERDALE, FL 00000
TITLE	D
NAME	POTTER, DORIS M.
STREET ADDRESS	48 PLEASANT HILL LANE
CITY, ST, ZIP	FT. LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	Zip 33319
21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	2917 Port Royale Lane
24 CITY, ST, ZIP	Ft. Lauderdale, FL 33308
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	Zip 33319
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information submitted 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. If 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, in an attachment with an address

SIGNATURE: *Doris M. Potter* Secretary-Treasurer January 11, 1995 (305) 772-5270
(Signature) (Typed or Printed Name of Signing Officer or Director) (Date) (Telephone No.)