FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 458503

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OWENS INTERNATIONAL MARKETING, INC.

City & State Country Zip	Principal Place	e of Business	Mailing Address	Mailing Address				f 1844t 2126t Britt bitt Birti Steat itt attit bibri britt britt andre andre andre andre andre andre			
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Suite. April #, Oct Suite Suite April #, Oct Ap								3a. Da	ate of Last 16/1996	Report	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27	- ¬ ΄	lace of Business		າ ້				·	\rightarrow		
Fee Required Fee		#, etc									
Trust Fund Contribution Addition for Peers Ad	22		27	27			5. Certificate of Status Desired				
Zep Country Zip So So So So So So So S	¬ '	е	├ ──	-							
S. Hanne and Address of Current Registered Agent OWENS,ROBERT J. 505 BRENTWOOD DRIVE TEMPLE TERRACE FL 33617 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 65 Zip Code 11. Fursional to the provisions of Socions 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered optics or registered agent, or both, in the State of Florida. Such change was submitted by the corporation's board of directors. I hereby accept the epipolismost of Section 607.0505, Florida Statules. SIGNATURE 12.	Zip	իŋ ´	Zip		n '		8. This corporation has liability for intangible tax under s. 199.032,				
OWENS, ROBERT J. SOS BRENTWOOD DRIVE TEMPLE TERRACE FL 33617 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) 86 Size of Force of Section 27,0502 and 607,1508, Florida Statutes, the advanced organization 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 among the purpose of changing its registered agent are formation with, and accept the obligations of, Section 607,0505, Florida Statutes. Street Address (P.O. Box Number is Not Acceptable) 87 FL 85 Zip Code 88 Street Address (P.O. Box Number is Not Acceptable) 89 City FL 85 Zip Code 80 City FL 85 Zip Code 80 City FL 85 Zip City FL 85 Zip Code 81 Street Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Street Address (P.O. Box Number is Not Acceptable) 86 Zip Code 87 Zip Code 88 City FL 85 Zip Code 89 City FL 85 Zip City FL 8	24			[30]							
So BREATWOOD DRIVE TEMPLE TERRACE FL 33617 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. For source to the provisions of Sections 20' 00'00 and 60' 150'0. Florida Sistuae, the above-named corporation authritis, this statement for the purpose of changing its registered agent of the registered section of both in the State of Rodds. Such change was authritized by the corporation's board of directors. I hereby accept the epitigations of, Section 60' 00'00'00', Section 60' 00'00', Section 60'00', Section 60'00', Section 60', Section 60	∩WE		Heilt Haftistelen Wallt		81	Name	(U. Maine and Addides of Now In	Sieraien	- gone	N 1013 - 0.01110 - 111 -	
B3 84 City FL 85 Zip Code	505 BRENTWOOD DRIVE			-	82 Street Address (P.O. Box Number is Not Accept			ole)			
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information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal affect as if made under noth; the											
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	esformatic	no indicated on this annual conord	or cumplemental annual report ic.	trive and a	001	wete and t	that my signature shall have the same leg	al offert a	e if made i	under nath: tha	
	Lam an o	officer or director of the corporation	on or the receiver or trustee empoy	wered to e	Xec	ute this re	port as required by Chapter 607, Florida	Statutes; e	ind that m	y name	

SIGNATURE:

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Apr 25 1997 8:00am

Secretary of State