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

| ļ | 1997 | DIV | VISION OF C | ORPORA | TIONS | | |
|---|--|--|--|--|---|--|--|
| 1. Corporation | MENT # 46966 NAME MARKETING SERVICES | • | 7) | | | | |
| | | | | | | | REBIT BETEK BEDEK BEBEK BEBEK BEBEK FEBE |
| Principal Place | e of Business | Mailing Addr | ess | | | | FIBNI BABAL BABAL BABAL BABAL HEBI |
| 3300 NE 19151 | | 3300 NE 1918 | 3300 NE 191ST STREET | | | | |
| #1801 Aventura Fl | | #1801 AVENTURA FL 33180-2448 | | | 1 | | |
| US | •••• | US | US | | | 3. Date Incorporated or Qualified 03/21/1975 | 3a. Date of Last Report 04/03/1996 |
| h | lace of Business | ∳~~- 1 ~ | 2a. Mailing Address | | | 4. FEI Number 59-2739354 | Applied For |
| Suite, Apt | #. etc | Suite, Apt | # etc | | | 5872738354 | Not Applicable \$8.75 Additional |
| 22 | ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 27 | | | | Certificate of Status Desired | Fee Required |
| City & State | () | City & Sta | ite | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| , Ζ _ι ρ | Country | 7 ₁ p | | Coun | try | 8. This corporation has liability for | tangible tax under s. 199.032, |
| 24 | 25 9. Name and Address of Cu | rent Registered Ager | <u> </u> | 30 | | Florida Statutes 10. Name and Address of New Reg | Yes No |
| HAL | L, IRVING M. | Total Fingulation Pigor | | | 11 Name | 10. Italia and Madress of Mar 1108 | TOTOLO ANGUIL |
| 3300 NE 191ST STREET | | | | | Stroot Arte | dress (P.O. Box Number is Not Acceptable | 0) |
| APT. 1801 | | | | | | STORES (1.O. DON TRUITIDOS TO TROT ACCEPTADOS | |
| AVENTURA FL 33180 | | | | | 13 | | |
| | | | | 18 | 14 City | | FL 85 Zip Code |
| 11. Pursuant to office or reagont if an SIGNATURE | to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o | .0502 and 607.1508, Flitate of Florida. Such of bligations of, Section 6 | orida Statute nange was a 07.0505, Flo | es, the about outhorized orida Statu | ove-named cor by the corpora tes. | rporation submits this statement for the pu ation's board of directors. I hereby accept | |
| | Surveture, typed or profestinance of registers | | (NOT) | | Agent signature requ | uired when reinstating) | DATE |
| 12. | OFFICERS | AND DIRECTORS | DELETE | 13. | : | ADDITIONS/CHANGES TO OFFICE | Change Addition |
| NAME | HALL, IRVING | - | , DECENE | 1.2 NAM | } | | Carlonaldo (Carlon) |
| STREET ACHORESS (| 3300 NE 191ST ST., APT. | 1801 | | | EE1 ADDRESS | | |
| CHTY - ST - ZIP | AVENTURA FL | | : | 1.4 CITY | '-ST-ZIP | | |
| THE | V V | | DELETE | 2.1 TITL | E | | Change Addition |
| NAME T | QUINT, LEONARD 4485 SW 151 AVE | | | 22 NAN | " (| | |
| STREET ADDRESS | PEMBROKE PINES FL | | | | EET ADDRESS | | } |
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| STREET ADDRESS | | | | | EET ADDRESS | | { |
| CHY-SI 7IP | | | | • | - S1 - ZIP | | |
| THEF | | | DELETE | 6.1 TITL | 1 | | Change Addition |
| NAME | | | | 6.2 NAN | I . | | Ì |
| Leagur Annoise L | | | | aro e a | EFT ADDRESS | | l. |

14. I do 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 people or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the conviction 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.

FILED

Apr 09 1997 8:00am

Secretary of State