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

**CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 562215 111

**FILED** Feb 02 1998 8:00am Secretary of State

1. Corporation	ING PROMOTIONS-GULF.	` '				
Principal Place of Business Mailing Address				<del></del>		
1115 NE 9TH AVENUE 1115 NE 9TH AVENUE						
FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 3330					DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified		3 51 NOL
					03/23/1978	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26		26	26		59-1802910	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	<del>                                     </del>		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required	
City & State	3	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip Country		Zip	Zip Country		Trust Fund Contribution	Added to Fees
24]	25 29 30		<del></del>	ountry  8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.   Yes No		
-71	9. Name and Address of Curr		1001		10. Name and Address of New Registere	
PE/	ARSON, KAYE		8	Name		
111		8:	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
FT.	LAUDERDALE FL 33304			Olloc, ra	diess (i .O. Box Hamber is Not / Gooptable)	
			8:	3		
			8-	4 City		85 Zip Code
			- 1	1 '	F	<b>L</b> 1 1 ` i
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 a			gent signature req	uired when reinstating) DATE	UD DIDECTORS IN 40
12.	OFFICERS AND DIRECTORS  DELETE		13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AF	Change Addition
NAME	PEARSON, KAYE		1.2 NAME			
STREET ADDRESS	1115 NE 9TH AVE			ET ADDRESS		Í
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-	i		
TITLE		☐ DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME			(
STREET ADDRESS			2.3 STREE	ET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-7IP			
TITLE	DELETE		3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	ET ADDRESS		
CITY-ST-ZIP	· <del></del>		3.4. CITY			Chance Laddition
TITLE	<del>-</del>		4.1 TITLE	ł		Change Addition
NAME EXPERT ADDRESS	1		4. 2 NAMI			
STREET ADDRESS				ET ADDRESS		ļ
CITY-ST-ZIP TITLE			4.4 CITY - 5.1 TITLE			Change Addition
NAME			5.2 NAME	ļ		
STREET ADDRESS	J 5		5	T ADDRESS		}
CITY-ST-ZIP			5.4 CITY-			
TITLE			6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
A.D. AT 7:0						

14. Thereby 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 is 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 correction 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 chapter 607, or on an attachment with an address.