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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

MARKET	ING ASSOCIATES/USA, INC). 			
Principal Place of Business TAMPA INTERNATIONAL AIRPORT TAMPA FL 33607		Mailing Address TAMPA INTERNATIONAL AIRPORT TAMPA FL 33607		7 100110 01105 FIGUR 00111 10018 FIGUR 10018	e alasta andni didit dikati arasta didit sadi
				3. Date Incorporated or Qualified 02/22/1979	3a. Date of Last Report 03/29/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1882841	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & Stat	e:	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25 9. Name and Address of Currer	29	30	Florida Statutes 10. Name and Address of New F	Yes No
DAD		it uadistalan waant	B1 Name	IV. Name and Address of New F	Johnstonen Whour
DARREY, JEFFREY A 4704 HERON LANE			82 Street Add	ress (P.O. Box Number is Not Accept	ahlol
	PA FL 33629		82 Sireet Add	ress (F.O. Box Number is not Accept	able)
			83		
			84 City		85 Zip Code
44 Descript	to the provinces of Continue 607 060	12 and 607 1508 Florida Ctatu	1 1	paration submits this exclament for the	FL 63 2 p code
office or r	registered agent, or both, in the State	of Florida, Such change was	authorized by the corpora	poration submits this statement for the tion's board of directors. I hereby acc	ept the appointment as registered
	im tamiliar with, and accept the oblig	alions of, Section 607.0505, h	onda Statutes.		
SIGNATURE	Signature: Typed or printed name of registered agr	ent and title if applicative (NO	E Registered Agent signature requi	red when reinstating)	DATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TIFLE	PTD DADDEY IEEEDEY A	[_] DELETE	1.1 TiTLE		Change Addition
NAME STREET ADDRESS	DARREY, JEFFREY A 4704 W HERON LANE		1.2 NAME 1.3 STREET ADDRESS		
CITY-S1-7IP	TAMPA FL		1.4 CITY-ST-ZIP		
TILE	\$	DELETE	21 TITLE		Change Addition
NAME	DARREY, SHARON A		2.2 NAME		
STREET ADDRESS	4704 W HERON LANE		23 STREET ADDRESS		
CITY-ST-ZP	TAMPA FL	T priest	2 4 CITY+ST-ZIP	······································	FIALLS FIALLS
TITLE	SMITH, J.E.	L_] DELET€	3.1 THTLE		Change Addition
NAME STREET ADDRESS	14755 FEATHER COVE RD		3.2 NAME	:	
CHT-ST-ZIP	CLEARWATER FL		3.3 STREET ADDRESS 3.4. CITY+ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		,
STREET ADDRESS			4.3 STREET ADDRESS		
C-TY-ST-7iP		T pricyc	4.4 CITY-ST-ZIP		Channe L Addition
TITLE NAME:		☐ DELETE	5.1 TITLE 5.2 NAME		Change L Addition
NAME STREET ADDRESS			5.3 STREET ADDRESS		
CITY - \$1 - ZIP			5.4 C(TY-ST-2IP		
THLE		DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME	/	
STREET ADDRESS			63 STREET ADDRESS	<i>(</i>	
City-St-ZP	by cartify that the information commis	id with this filing does not avail	64 CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statu	tes. I further certify that the
informatio	on indicated on this annual report or :	supplemental annual report is	true and accurate and tha	t my signature shall have the same le rt as required by Chapter 607, Florida	gal effect as if made under cath, that
appears	in Block 12 or Block 13 if changed, o	r on an altachagent with an ad	dress.		

SIGNATURE:

D NAME OF SIGNING OFFICER OR DIRECTOR

Dayline Phone #

FILED

Mar 27 1997 8:00am

Secretary of State

0523473