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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 05, 1999 8:00am **Secretary of State**

FILED

02-05-1999 90024 034 ***150.00

DOCUMENT # 626082 1. Corporation Name

PRO-MARK, INCORPORATED

Principal Place of Business Mailing Address					-	ASBUT BIBLI BEBEL BU	6 0 4 4
2522 PRETTY BAYOU ISLAND DRIVE P. O. BOX 15932 PANAMA CITY FL 32405 PANAMA CITY FL 32406				DO NOT WRITE IN THIS	SSPACE		
		US			3. Date Incorporated or Qualifed	JULAUL	
					06/14/1979		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	App	lied For
26		26			59-1916054	Not	Applicable
		Suite, Apt. #, etc.	Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A	
		27				Fee Rec	·
City & State		⊢ '	City & State		6. Election Campaign Financing	\$5.00 N	
Zip Country		28 7in	Zip Country		Trust Fund Contribution	Added to	rees
25 25 25 25 25 25 25 25 25 25 25 25 25 2			¬ '		8. This corporation owes the current year Intangible Personal Property Tax. Yes		
(4)	9. Name and Address of Curren		<u> </u>		10. Name and Address of New Registered		
			81	Name			
GULKIS, NORMAN			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
2522 PRETTY BAYOU ISLAND DRIVE			02	31 eet Address (F.O. Box Number is Not Acceptable			conservat
PANAMA CITY FL 32405			83				
			84	City		85 Zip C	ode
	· · · · · · · · · · · · · · · · · · ·			,	Fl	-	
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was auti	norized by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	intment as reg	egistered istered
ŭ	in familiar with, and accept the obliga	dons of, Section 607,0303, 1 lond	a Glalules	•			
SIGNATURE	Signature, typed or printed name of registered ager	t and title if applicable. (NOTE: Re	egistered Agen	t signature required			
12.	OFFICERS AN	D DIRECTORS	13.	-	. ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	GULKIS, SUE C		1.2 NAME		·		
STREET ADDRESS	2522 PRETTY BAYOU ISLAND		1.3 STREET				
CITY-ST-ZIP	PANAMA CITY FL 32405	☐ DELETE	1.4 CITY-\$7	r-zip		Change	Addition
TITLE	STD CHILD'S NORM	["] DELETE	2.1 TITLE			[_] Change	C Addition
NAME	GULKIS, NORM 2522 PRETTY BAYOU ISLAND		2.2 NAME 2.3 STREET	ADDOESS		_	
STREET ADDRESS	PANAMA CITY FL		2.4 CITY-S				
CITY-ST-ZIP	TANAMA OITTIL	☐ DELETE	3.1 TITLE	11-217		☐ Change	Addition
NAME	· · · · · · · · · · · · · · · · · · ·		3.2 NAME				
STREET ADDRESS	faraga Profiles		3.3 STREET	ADDRESS			3 . 4 9
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			113
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME	-		4. 2 NAME				
STREET ADDRESS	•		4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST	r-ZiP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition (
NAME	•		5.2 NAME		, .		
STREET ADDRESS	3/		5.3 STREET			i	
CITY-ST-ZIP	* * * * * * * * * * * * * * * * * * * *	☐ DELETE	5.4 CITY-ST 6.1 TITLE	1-4P		Change	Addition
TITLE			6.2 NAME			□ cuange	
NAME STREET ADDRESS	WEST ALL STATES		6.3 STREET	ADDRESS			
2 IKEE I WODKE 22	AND THE PROPERTY OF THE	<i>a</i> .	6.4 CITY-ST				
CITY-ST-ZIP	a company		0.7 0111-3				

14. I 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 report or 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 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, or on an attachment with an address, with all other like empowered.

850 763-8617 Daytime Phone #