

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 675911

FILED
Mar 05, 2002 8:00 AM
Secretary of State

Entity Name: CONSOLIDATED MARKETING COMPANY, INC.

Current Principal Place of Business:

7317 FAIRFAX DR.
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 16374
FT. LAUDERDALE, FL 33318 US

New Mailing Address:

FEI Number: 59-2004809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIBOWITZ, BEN
7317 FAIRFAX DR.
TAMARAC, FL 33321

Name and Address of New Registered Agent:

LEIBOWITZ, BEN PRES.
7317 FAIRFAX DR.
TAMARAC, FL 33321

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BEN LEIBOWITZ

03/05/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: COHEN, ELLEN,
Address: 10756 CHARLSTON PL.
City-St-Zip: COOPER CITY, FL

Title: PTD () Delete
Name: LEIBOWITZ, BEN,
Address: 7317 FAIRFAX DR.
City-St-Zip: TAMARAC, FL

Title: D () Delete
Name: FOX, PHILLIP
Address: 400 S HOLLYBROOK DR #102
City-St-Zip: PEMBROKE PINES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEN LEIBOWITZ

PRES

03/05/2002

Electronic Signature of Signing Officer or Director

Date