

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003904

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ESSELL MARKETING UNLIMITED, INC.

## Current Principal Place of Business:

114 SE 7TH AVENUE  
UNIT #3  
DELRAY BEACH, FL 33483

## New Principal Place of Business:

700 E. BOYNTON BEACH BLVD.  
UNIT # 803  
BOYNTON BEACH, FL 33435

## Current Mailing Address:

114 SE 7TH AVENUE  
UNIT #3  
DELRAY BEACH, FL 33483

## New Mailing Address:

700 E. BOYNTON BEACH BLVD.  
UNIT # 803  
BOYNTON BEACH, FL 33435

FEI Number: 02-0633926

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: SPICER, WESTON E  
Address: 114 SE 7TH AVENUE #3  
City-St-Zip: DELRAY BEACH,, FL 33483

Title: VP ( ) Delete  
Name: SPICER, NIVIA  
Address: 114 SE 7TH AVENUE #3  
City-St-Zip: DELRAY BEACH, FL 33483

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SPICER, WESTON E  
Address: 700 E. BOYNTON BEACH BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP (X) Change ( ) Addition  
Name: SPICER, NIVIA  
Address: 700 E. BOYNTON BEACH BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33435

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WESTON E. SPICER

OFFI

04/30/2009

Electronic Signature of Signing Officer or Director

Date