

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F28980

FILED  
Mar 23, 2004  
Secretary of State

Entity Name: R/EMARKETING CONSULTANTS, INC.

## Current Principal Place of Business:

203 NORTH MARION ST  
TAMPA, FL 33612 US

## New Principal Place of Business:

1102 WEST CASS STREET  
TAMPA, FL 33606 US

## Current Mailing Address:

203 NORTH MARION ST  
TAMPA, FL 33612 US

## New Mailing Address:

1102 WEST CASS STREET  
TAMPA, FL 33606 US

FEI Number: 59-2084277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OXTAL, RONALD A  
203 NORTH MARION STREET  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

OXTAL, RONALD A  
1102 WEST CASS STREET  
TAMPA, FL 33606 US

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:

03/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: OXTAL, RONALD A.,  
Address: 203 NORTH MARION STREET  
City-St-Zip: TAMPA, FL

Title: EVP ( ) Delete  
Name: HENDRY, HAYNES T.,  
Address: 203 NORTH MARION STREET  
City-St-Zip: TAMPA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: OXTAL, RONALD A.,  
Address: 1102 WEST CASS STREET  
City-St-Zip: TAMPA, FL 33606

Title: EVP (X) Change ( ) Addition  
Name: HENDRY, HAYNES T  
Address: 1102 WEST CASS STREET  
City-St-Zip: TAMPA, FL 33606

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: RONALD A. OXTAL

PD

03/23/2004

Electronic Signature of Signing Officer or Director

Date