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

PROFIT CORPORATION ANNUAL REPORT

1997

NAME

STREET ADDRESS

C(1Y - S1 - ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001031 (1)

ANDREW WETZLER TELEMARKETING RESOURCES, INC.

Principal Place of Business Mailing Address 5030 CHAMPION BOULEVARD, STE 6289 5030 CHAMPION BOULEVARD. STE 6299 **BOCA RATON FL 33496 BOCA RATON FL 33496-2473** 3a. Date of Last Report 3. Date Incorporated or Qualified 02/29/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address **Applied** For 52-1669321 4400 N. Federal Hwy Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Suite 210 Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Boro Paton Trust Fund Contribution Added to Fees 23 28 Country Country Zip This corporation has liability for intangible taxunder s. 199.032, Yes No Florida Statutes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WETZLER, ANDREW 440 N. FEDERAL HIGHWAY, STE 210 82 Street Address (P.O. Box Number is Not Acceptable) 5543 N. Military Trai **BOCA RATON FL 33431** 83 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered City office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signal ine, typed or ported name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS (96/6)13. PCD DELETE Change Addition THLE 1.1 TITLE WETZLER, PHILIP A 1.2 NAME NAME N. Mili tary trail 4400 N FEDERAL HWY, STE 210 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 City-ST-ZIP CITY - ST - 2(P Change DELETE 2.1 TITLE Addition TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-SI-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 32 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-SI-ZIP 34. CITY-ST-ZIP DELETE Change Addition 41 TITLE 4.2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZiP 4.4 City-St-ZiP DELETE Change Addition 51 TITLE TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY-S1-2IP DELETE Change Addition TITLE 6.1 TITLE

appears in Block 12 or Block 13, if changed, or of entranschment with an address.

SIGNATURE: West State And Andrew Welter 4/18/97 561-8

14. I do 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

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 if 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