

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

FILED

May 06 1998 8:00am  
Secretary of State

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           |                                                                                                    |                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>PROFIT CORPORATION</b><br><b>ANNUAL REPORT</b><br><b>1998</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |                                                                                           |
| <b>DOCUMENT #</b> <span style="float: right;">F96000006029</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                           |                                                                                                    |                                                                                           |
| 1. Corporation Name<br><div style="text-align: center; padding: 5px;">ADMARK Marketing Company, Inc.</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           |                                                                                                    |                                                                                           |
| Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                           | Mailing Address                                                                                    |                                                                                           |
| 7300 Corporate Center Dr.<br>Miami, FL 33126-1223                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                           |                                                                                                    |                                                                                           |
| DO NOT WRITE IN THIS SPACE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           |                                                                                                    |                                                                                           |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           | 2a. Mailing Address                                                                                |                                                                                           |
| 21 3701 SW 47th Ave.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 26 P.O. Box 291236                        |                                                                                                    |                                                                                           |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Suite, Apt. #, etc.                       |                                                                                                    |                                                                                           |
| 22 105                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 27                                        |                                                                                                    |                                                                                           |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | City & State                              |                                                                                                    |                                                                                           |
| 23 Davie, FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 28 Davie, FL                              |                                                                                                    |                                                                                           |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Country                                   | Zip                                                                                                | Country                                                                                   |
| 24 33314                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 25 U.S.                                   | 29 33329                                                                                           | 30 U.S.                                                                                   |
| 9. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 10. Name and Address of New Registered Agent                                                       |                                                                                           |
| CSC Networks/Prentice-Hall<br>1201 Hays Street<br>Tallahassee, FL 32301                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           | 81 Name                                                                                            |                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 82 Street Address (P.O. Box Number is Not Acceptable)                                              |                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 83                                                                                                 |                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 84 City <span style="float: right;">FL</span> 85 Zip Code                                          |                                                                                           |
| 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 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 <u>CSC Networks/Prentice-Hall</u> <span style="float: right;">4/30/98</span><br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                                                                                                                                                                                                                                          |                                           |                                                                                                    |                                                                                           |
| 12. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                           | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                              |                                                                                           |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | President <input type="checkbox"/> DELETE | 1.1 TITLE                                                                                          | Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition     |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Linda L. Marshall                         | 1.2 NAME                                                                                           | Scott W. Ryan                                                                             |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 3701 SW 47 Ave., #105                     | 1.3 STREET ADDRESS                                                                                 | 111 Presidential Blvd, #246                                                               |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Davie, FL 33314                           | 1.4 CITY - ST - ZIP                                                                                | Bala Cynwyd, PA 19004                                                                     |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> DELETE           | 2.1 TITLE                                                                                          | Chairman <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition     |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           | 2.2 NAME                                                                                           | David Fields                                                                              |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           | 2.3 STREET ADDRESS                                                                                 | 1356 Warner Rd                                                                            |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 2.4 CITY - ST - ZIP                                                                                | Meadowbrook, PA 19406                                                                     |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> DELETE           | 3.1 TITLE                                                                                          | AVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition          |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           | 3.2 NAME                                                                                           | Michael Gorlick                                                                           |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           | 3.3 STREET ADDRESS                                                                                 | 3 Quebec Woods Ct.                                                                        |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 3.4 CITY - ST - ZIP                                                                                |                                                                                           |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> DELETE           | 4.1 TITLE                                                                                          | Manalapan, NJ <input type="checkbox"/> Change <input type="checkbox"/> Addition           |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           | 4.2 NAME                                                                                           | 07726                                                                                     |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           | 4.3 STREET ADDRESS                                                                                 |                                                                                           |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 4.4 CITY - ST - ZIP                                                                                |                                                                                           |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> DELETE           | 5.1 TITLE                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                         |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           | 5.2 NAME                                                                                           |                                                                                           |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           | 5.3 STREET ADDRESS                                                                                 |                                                                                           |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 5.4 CITY - ST - ZIP                                                                                |                                                                                           |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> DELETE           | 6.1 TITLE                                                                                          | 300002515328 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                           | 6.2 NAME                                                                                           | -05/08/98--01051--031                                                                     |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           | 6.3 STREET ADDRESS                                                                                 | ***150.00                                                                                 |
| CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | 6.4 CITY - ST - ZIP                                                                                |                                                                                           |
| 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. |                                           |                                                                                                    |                                                                                           |
| SIGNATURE: <u>Linda L. Marshall</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                           | 4/30/98 (954) 791-3560                                                                             |                                                                                           |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                           | Date Daytime Phone #                                                                               |                                                                                           |

CR2E034 (10/97)