

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 31, 2007 08:00 AM  
Secretary of State

DOCUMENT # F99000003323

1. Entity Name

SELLETHICS MARKETING GROUP, INC.



Principal Place of Business

941 MATTHEWS-MINT HILL RD.  
MATTHEWS NC 28105

Mailing Address

941 MATTHEWS-MINT HILL RD.  
MATTHEWS NC 28105



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 56-2119424

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SHARP, PAUL  
6850 NEW TAMPA HWY.  
STE. 500  
LAKELAND FL 33815

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE CP ☐ Delete  
NAME BARHAM, JOEL  
STREET ADDRESS 941 MATTHEWS MINT HILL ROAD  
CITY-ST-ZIP MATTHEWS NC 28105

TITLE VCVP ☐ Delete  
NAME HENSLEY, JEFF  
STREET ADDRESS 941 MATTHEWS MINT HILL ROAD  
CITY-ST-ZIP MATTHEWS NC 28105

TITLE VP ☐ Delete  
NAME MASON, WENDY  
STREET ADDRESS 941 MATTHEWS MINT HILL ROAD  
CITY-ST-ZIP MATTHEWS NC 28105

TITLE S ☐ Delete  
NAME CORBETT, ROBERT  
STREET ADDRESS 941 MATTHEWS MINT HILL ROAD  
CITY-ST-ZIP MATTHEWS NC 28105

TITLE VP ☐ Delete  
NAME MANN, JOHN  
STREET ADDRESS 941 MATTHEWS MINT HILL ROAD  
CITY-ST-ZIP MATTHEWS NC 28105

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS U00000612688  
CITY-ST-ZIP 02/05/07-80010-008 158.75

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

1/29/07

104-847-4450