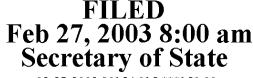
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) H93682 DOCUMENT # 1. Entity Name DISCOVER MARKETING, INC.

SIGNATURE



DOCUMENT # H93682 1. Entity Name DISCOVER MARKETING, INC.					02-27-2003 90154 015 ***150.00				
Principal Place of Business 1375 S. ANDREWS AVE POMPANO BEACH FL 33069 US			1375 S. ANDREWS AVE POMPANO BEACH FL 33069			AN ANAN BIRN BIRN RADI NEG			
2. Principal Place of Business		3. Mailing Address	3. Mailing Address		- 1 1001001 0110 10100 11100 01101 10110 1101 01101				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State		City & State	City & State		4. FEI Number 59-2622645 Applie				
Zip	Country	Zip	Country	·		Not Applicable 8.75 Additional Reguired			
6: Name	and Address of Co	irrent Registered Agent	×						
HARWICK, STEPHEN			Name	e	,	gent -			
21609 ALTAMIRA AVE. BOCA RATON FL 33433				Street Address (P.O. Box Number is Not Acceptable)					
		·	City	·	FL	Zip Code			
8. The above named entity the obligations of registe	submits this staten ered agent.	nent for the purpose of changing it	s registered office	or registere	ed agent, or both, in the State of Florida. I am fa	L miliar with, and accept			

Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)			DATE	
i Make	FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Check Payable to Florida Department of State			9. Election Car Trust Fund C	mpaign Financing Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGE	S TO OFFICERS AND I	DIDECTORS IN 44	
TITLE	\$ * P.	[7] p. 1-1-	Tiri	1021101070171102	B TO OTT ICENS AND L	JIHECTORS IN TT	

∟ Delete Addition Change NAME HARWICK, STEPHEN NAME STREET ADDRESS 21609 ALTAMIRA AVE STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP TITLE ٧S ☐ Delete TITLE Change ☐ Addition NAME HARWICK, GERRY Y NAME STREET ADDRESS 21609 ALTAMIRA AVE STREET ADDRESS CITY-ST-7IP **BOCA RATON FL 33433** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS

12. 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 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

☐ Change

☐ Addition