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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J30044

(8)

MARKETING DESIGN FORCE INC.

		 				
Principal Place of Business Mailing Add 1801 BELVEDERE RD 1601 BELVE SUITE 501 SOUTH SUITE 501: WEST PALM BEACH FL 33406 WEST PALM			41			
AUTO LANGO DEL CONTROL DE CONTROL	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			3. Date Incorporated or Qualified 08/22/1986	3a. Date of Last F 04/17/1996	Report
2. Principal Place of Business	2a. Mailing Address		······································	4. FEI Number	A	pplied For
21	26			59-2709643		ot Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc			5. Certificate of Status Desired	1 7	Additional equired
City & State	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip Country	Zip	С	ountry	8. This corporation has liability for	intangible tax under s	. 199.032,
24 25	29	30			Yes No	
Name and Address of Current Registered Agent				10. Name and Address of New Re	egistered Agent	
W PALM BCH FL 33406 11. Pursuani to the provisions of Sections 607- office or registered agent, or both, in the Sagent. I am familiar with, and accept the o	0502 and 607 1508, Florida S tate of Florida, Such change bligations of, Section 607 050	Statutes, the was authori 5, Florida S	83 84 City above-named corporated by the corporated tuttes.	poration submits this statement for the tion's board of directors. I hereby acce	FL T	Code ts registered s registered
SIGNATURE Signature, typica or printed name of registerie	d agent and title it applicable	(NOTE: Registe	ered Agent signature requi	red when reinstating)	DATE	
	AND DIRECTORS	13		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR	RS IN 12
THILE	DELETI	1.1	TITLE		☐ Change	Addition
NAME HALE, PHILLIP R		1.2	NAME			
STREET ADDRESS 1601 BELVEDERE RD., STE 501, SOUTH		1.3	STREET ADDRESS			
CITY: ST-2IP WEST PALM BCH FL			CITY-ST-ZIP			
TITLE AS	☐ DELETI	E 2.1	TITLE		☐ Change	Addition Addition
NAME PALMARIELLO, JOAN	TT 504 D	2.2	NAME			
STREET ADDRESS 1601 BELVEDERE RD, SUI	IE 501 D.	1	STREET ADDRESS			
CITY - S1 - ZIP W. PALM BEACH FL	T brieve		4 CITY - ST - ZIP		T 0	Addres-
PILE PCEO	L] DELETI	1	TITLE		☐ Change	☐ Addition
NAME BUDDEMEYER, DAVID	. 1		NAME			
STREET ADDRESS 1601 BELVEDERE RD. #50	· · ·	3.3	STREET ADDRESS			

6.4 CITY-ST-ZIP

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 information indicated on this annual report or suppliemental 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.

41 TIDE

4. 2 NAME

5 1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

SIGNATURE

TITLE

NAMÉ

TITLE

NAME

THE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

City-\$1-76

CITY - ST - ZIP

KNIGHT, WARREN

W PALM BCH FL

RUFFIN. ROBERT

W PALM BCH FL

HALE, PHILLIP

VAS

1601 BELVEDERE RD. #501

1601 BELVEDERE RD. #501

1601 BELVEDERE RD. #501

NATURE AND TYPES OR PRINTED NAME OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

Robert D. Ruffin, V.P. & Sec. (

(19)(561) 689-9970 Dayline Phone #

Change

Change

Addition

Addition

Addition

FILED

Apr 09 1997 8:00am

Secretary of State