2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J83876

City-St-Zip:

HOLLY HILL, FL

Entity Name: FLORIDA MARKETING INTERNATIONAL, INC.

FILED Feb 13, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 102 EAST GRANADA BLVD ORMOND BEACH, FL 32176 US **Current Mailing Address: New Mailing Address:** 102 EAST GRANADA BLVD ORMOND BEACH, FL 32176 US FEI Number: 59-2846422 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, RANDALL D 100 EAST GRANADA BLVD ORMOND BEACH, FL 32176 US 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. SIGNATURE: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SMITH, RANDALL D., Name: Name: 4493 S ATLANTIC AVENUE Address: Address: City-St-Zip: PONCE INLET, FL 32127 City-St-Zip: Title: Title: () Delete () Change () Addition CROOKSTON, CLAIR D., Name: Name: 406 BLACK OAK LANE Address: Address: ORMOND BEACH, FL City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition LALOG JR, JOSE O, Name: Name: 90 BRONSON LN Address: Address: City-St-Zip: PALM COAST, FL City-St-Zip: Title: SD () Delete Title: () Change () Addition KIEL, KEITH D., Name: Name: Address: 351 SCOTT DRIVE Address: City-St-Zip: ORMOND BEACH. City-St-Zip: Title: VD Title: () Delete () Change () Addition SALIBA, BONNIE, Name: Name: 1038 RIVERSIDE DR Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LALOG JR, JOSE O TD 02/13/2002