SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name K19406

(3)

COMPONENT DESIGN MARKETING, INC.

Mailing Address

7616 SOUTHLAND BLVD., SUITE 103

Principal Place of Business

7616 SOUTHLAND BLVD., SUITE 103

FILED Sep 12 1997 8:00am Secretary of State



ORLANDO FL 32809-3976		ORLANDO FL 32809-3976		DO NOT WRITE IN THIS SPACE	
İ				3. Date Incorporated or Qualified	3a. Date of Last Report
				03/28/1988	07/30/1996
	lace of Business	2a. Mailing Address	0 000	· Lat EEt Nicoshaa	Applied For
21 180	3 PARK CONTOR PR	W26 /803 1803	PARK CENTER ON	59-2910521	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 S 4 / 5 2 2 0 0 27 S4 / 7 2 2 0 0 City & State City & State 28 ORLAND			200		Fee Required
City & State	<u> </u>	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	LANDO F/.	28 ORLAND	Country	Trust Fund Contribution	Added to Fees
24 3283	L *	29 32-835	on II CA	This corporation owes or has pair Personal Property Tax due June	
124 228 3	g. Name and Address of Curren		30) 9 2 77	10. Name and Address of New Reg	
RADOLAN, BARRY B1 Name					
7040 COLITULIAND DILID				700.0	
	TE 103		82 Street Address (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32809					·····
			24 0		
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.050	and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the p	urnose 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					
OIGHATOILE ,	Signature, typed or printed name of registered age	nt and title if applicable (NOTE:	Registered Agent signature requi	red when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	P	☐ DELETE	1.1 THTLE		Change Addition
NAME	RADOLAN, BARRY		1.2 NAME	Den DARL CONTER	00.45
STREET ADDRESS	7616 SOUTHLAND BLVD., SU	TE 103	1.3 STREET ADDRESS	803 PARK CENTER	UNIVE, SUFEZOE
CITY-ST-ZIP	ORLANDO FL		1.4 CITY - ST - ZIP	803 PARK CENTER ORLANDO Fl. 3.	2835
TITLE		DELETE			L Change L Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		T DELETE	2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Oleren Di Adrigue
TITLE		☐ DELEVE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET AODRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Aridition
NAME		Dette! L			C ONGUE C ANDROLL
1			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
		ב שינניונ			CT Ottanific CT Visibility
NAME CYDEET ADODESC			6.2 NAME		-1
STREET ADDRESS			6.3 STREET ADDRESS		İ
CITY-ST-ZIP	ov certify that the information supplied	with this filing does not qualify	for the exemption state	d in Section 119 07/3Vi) Florida Statutes	Lighter certify that the
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 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.					

PAROLANI

2297