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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

## Feb 20, 1999 8:00 am Secretary of State

	1999	DIVISION OF C	ORPORATIONS	02-20-1999 90169 0.	32 1130.00
I. Corporation	IMENT # K50896 ARKETING, INC.	6			
				4 1 <b>0616</b> 191 <b>101 8</b> 191 <b>1618</b> 1 1 <b>911</b> 1616 611 <b>10</b>	<b>a</b> n <b>a</b> n an
· ·	ce of Business	Mailing Address			ası alalı bidil bibil bibil bibil ibbi
541 S STATE MARGATE FL		541 S STATE RD 7 STE 7 MARGATE FL 33068			
US	33000	US		DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualifed	
				12/13/1988	
2. Principal F	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		65-0089109	Not Applicable
22	,	27		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ite	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25 9. Name and Address of Curren		30	Personal Property Tax.	Yes No
		it Negistered Agent	81 Name	10. Name and Address of New Register	ed Agent
	TH, PAULA M.		82 Street Addr	/D.O. B	
541 S STATE RD 7 STE 7		621 Street Addi	ress (P.O. Box Number is Not Acceptable)		
MAF	RGATE FL 33068		83		
			84 City		85 Zip Code
44 Durayant	to the CO7.050	0 1 007 1500 50 11 00 11		oration submits this statement for the purpose	·L
11, Fuisuaiii	to the provisions of Sections 607.050	ı∠ and bur. I bub. Florida Statutes	: the annve-named com	inration submits this statement for the number	of changing its registered.
omce or !	registered agent, or both, in the State	of Florida. Such change was aut	horized by the cornoration	on's board of directors. I hereby accept the ap	pointment as registered
agent. I a	registered agent, or both, in the State am familiar with, and accept the obligat	of Florida. Such change was aut	horized by the cornoration	on's:board of directors. I hereby accept the app	pointment as registered
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14. 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 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 of 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 adachment with an address, with all other like empowered.

SIGNATURE:

954-968-1660