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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K59071

(6)

DJS MARKETING GROUP, INC. Mailing Address Principal Place of Business 2398 S. DIXIE HWY. 2398 S. DIXIE HWY. MIAMI FL 33133-2314 MIAMI FL 33133 3. Date Incorporated or Qualified 3a. Date of Last Report 04/01/1996 01/16/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0154677 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 25 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCARPA, DEBORAH JOAN SCARPA, DEBORAH JOAN 17878 N BAY RD Street Address (P.O. Box Number is Not Acceptable) 82 APT #403 3683 HIBISCUS STREET 83 N MIAMI BEACH FL 33160 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DPT DELETE Change Addition TITLE 11 TIDE DPT SCARPA, DEBORAH JOAN NAME 1.2 NAME SCARPA, DEBORAH JOAN 17878 N BAY RD, APT#403 STREET ADDRESS 1.3 STREET ADDRESS 3683 HIBISCUS STREET N MIAMI BEACH FL CITY-ST-ZIP 1.4 City - ST - ZiP MIAMI. FL 33133 DELETE Change Addition 2.1 TITLE TITLE CASTRO. ROLANDO 22 NAME NAME 3683 HIBISCUS ST STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition THILE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-7IP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-7IP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - S1 - ZIP 5.4 City-St-ZIP DELETE Change TITLE 61 TITLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

SIGNATURE:

14. To 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.

02/06/97

(305) 860-9500

FILED

Feb 11 1997 8:00am

Secretary of State