2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2001 08:00 AM
Secretary of State

DOCUMENT # **K61092**

1. Entity Name
DIRECT RESPONSE PUBLICATIONS, INC.

Principal Place of Business	Mailing Address
185 VIA MIZNER	185 VIA MIZNER
BOCA RATON FL 33432	BOCA RATON FL 33432

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0125035** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GIARRATANA, RICHARD
1601 BELEVEDRE RD.
STE. 207 SOUTH
WEST PALM BEACH FL
33406

7. Name and Address of New Registered Agent

Name: GIARRATANA RICHARD
Street Address (P.O. Box Number is Not Acceptable): 185 VIA MIZNER
City: BOCA RATON FL Zip Code: 33432

8. 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 RICHARD GIARRATANA 03/30/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	GIARRANTANA RICHARD	
STREET ADDRESS	1601 BELEVEDRE RD.	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	
TITLE	SD	☐ Delete
NAME	GIARRANTANA TRACEY	
STREET ADDRESS	1601 BELEVEDRE RD.	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☒ Change ☐ Addition
NAME	GIARRANTANA RICHARD	
STREET ADDRESS	185 VIA MIZNER	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	SD	☒ Change ☐ Addition
NAME	GIARRANTANA TRACEY	
STREET ADDRESS	185 VIA MIZNER	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (11/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Giarratana PD 03/30/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #