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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

|  | MENT # K7020<br>MARKETING, INC. | 63              | (4)             |                 |                | L NGCLOHAT DIA 1887A DOMO JARLE BYARA ANN OLOJA BYOJA                  | BIANI ANAK ALDIK BIANI KANI             |  |  |
|--|---------------------------------|-----------------|-----------------|-----------------|----------------|--|---|--|--|
| Principal Place of Business Mailing Address                                    |                                 |                 |                 |                 |                | I JUDIUNII DIN JUDIN BUNIN NINON TAN UUTIN NINON TAN UUTIN NINON       |   |  |  |
| 898 HUNTINGTON ST NE 898 HUNTINGTON ST. NE PALM BAY FL 32907 PALM BAY FL 32907 |                                 |                 |                 | NE              |                |  | D.O.                                    |  |  |
| U\$  |                                 | U\$             |                 |                 |                | DO NOT WRITE IN THIS S  3. Date Incorporated or Qualified              | PACE                                    |  |  |
|  |                                 |                 |                 |                 |                | 02/28/1989   |   |  |  |
| 2. Principal P   | lace of Business                | 2s. Mailin      | g Address       |                 |                | 4. FEI Number  | Applied For                             |  |  |
| 21   |                                 | 26              | 26              |                 |                | 59-2942548   | Not Applicable                          |  |  |
| Suite, Apt. #, etc. Suite, Apt. #, etc.  |                                 |                 |                 |                 |                | 5. Certificate of Status Desired                                       | \$8.75 Additional                       |  |  |
| 22 Cat. 8 Chai   |                                 |                 | City & State    |                 |                |  | Fee Required                            |  |  |
| City & Stat  | e                               | · · · · · ·     | State           |                 |                | 6. Election Campaign Financing Trust Fund Contribution                 | \$5.00 May Be<br>Added to Fees          |  |  |
| Z(p)   | Country                         | 28 Zip          | · · · · · ·     | Coun            | trv            | Trust Fund Contribution  8. This corporation owes or has paid the curr |   |  |  |
| 24   | 25                              | 29              |                 | 30              | .,             |  | Yes No                                  |  |  |
|  | 9. Name and Address of Curr     | <del></del>     | \gent           | 1               |                | 10. Name and Address of New Registered #                               | gent                                    |  |  |
| HE   | ERMES, BOB                      |                 |                 |                 | 11 Name        |  |   |  |  |
|  | 75 DETROIT AVE.                 |                 |                 | E               | 2 Street       | Address (P.O. Box Number is Not Acceptable)                            |   |  |  |
| CC   | DCOA FL 32926                   |                 |                 | ـ ا             |                |  |   |  |  |
|  |                                 |                 |                 | *               | 3              |  |   |  |  |
|  |                                 |                 |                 | Ē               | 4 City         |  | 85 Zip Code                             |  |  |
| 44 Durauant  | to the provisions of S 60°.     | ີ and €′ ນ08    | 9 Élorido Statu | tos the abo     | we named       | Corporation submits this statement for the purpose of                  | changing its registered                 |  |  |
| office or r  | egistered a int, or fine to     | OUL Y'          | h change was    | authorized      | by the corp    | poration's board of directors. I hereby accept the annotation          | ointment as registered                  |  |  |
| 1  | m familiar h. F                 | ngaus Jeetic    | on 607.0505, Fl | lorida Statu    | es.            |  |   |  |  |
| SIGNATURE  | Signature type: delld           | аде:а н аррікся | nic (NO         | TE Registered / | gent signature | required when reinstating) DATE  |   |  |  |
| 12.  | _rFICERS                        | → DIRECTORS     |                 | 13.             |                | ADDITIONS/CHANGES TO OFFICERS AND                                      |   |  |  |
| TITLE  | D                               |                 | □ DELETE        | 1.1 TITL        | :              |  | Change Addition                         |  |  |
| NAME   | HERMES, BOB                     |                 |                 | 1.2 NAM         | E              |  |   |  |  |
| STREET ADDRESS   | 3675 DETROIT ST                 |                 |                 |                 | ET ADDRESS     |  |   |  |  |
| CITY-ST-ZIP  | COCOA FL                        |                 | DELETE          |                 | -ST-ZIP        |  | Change Addition                         |  |  |
| TITLE<br>NAME  | HERMES, JOHN F.                 |                 | ☐ DELETE        | 2.1 T/TL/       |                | ·  | Change Moderon                          |  |  |
| STREET ADDRESS   | 898 HUNTINGTON NE               |                 |                 | 2.2 NAM         | ET ADDRESS     |  |   |  |  |
| CITY-ST-ZIP  | PALM BAY FL                     |                 |                 |                 | -ST-ZIP        |  |   |  |  |
| TITLE  | 7 7 1200) 127 7 0               |                 | DELETE          | 3 1 TITU        |                |  | Change Addition                         |  |  |
| NAME   |                                 |                 |                 | 3.2 NAM         |                |  |   |  |  |
| STREET ADDRESS   |                                 |                 |                 | 3.3 STRE        | ET ADDRESS     |  |   |  |  |
| CITY - ST - ZIP  |                                 |                 |                 | 3.4 CITY        | -ST-ZIP        |  |   |  |  |
| TITLE  |                                 |                 | ☐ DELETE        | 4.1 TITLE       | :              |  | Change Addition                         |  |  |
| NAME   |                                 |                 |                 | 4. 2 NAN        | AE )           |  | '                                       |  |  |
| STREET ADDRESS   |                                 |                 |                 |                 | ET ADDRESS     |  |   |  |  |
| CITY-ST-ZIP  |                                 |                 | DELETE          |                 | -ST-ZIP        |  | Change Addition                         |  |  |
| THE  |                                 |                 | L DECENE        | 5.1 TiTLI       | l l            | '  | Change Addition                         |  |  |
| NAME<br>CORET ADORESS  |                                 |                 |                 | 5.2 NAM         | l l            |  |   |  |  |
| STREET ADDRESS   |                                 |                 |                 |                 | ET ADDRESS     |  |   |  |  |
| CITY-S1-ZIP<br>TITLE   | <u> </u>                        | <del></del>     | DELETE          | 6 1 TITLE       | -ST-ZIP        |  | Change Addition                         |  |  |
| NAME   |                                 |                 |                 | 6.2 NAM         |                |  | - · · · · · · · · · · · · · · · · · · · |  |  |
| STREET ADDRESS   |                                 |                 |                 |                 | ET ADDRESS     |  |   |  |  |

SIGNATURE:

14. I hereby certify that the information supplied indicated on this annual report or supplied officer or director of the corporation of the Block 12 or Block 13 if changed, for an a

CITY-ST-ZIP

Jerner\_

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ot qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information frue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an powered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in

**FILED** 

Apr 20 1998 8:00am

Secretary of State