FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 PM 2:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K99649 (1)

1. Corporation Name

ABSOLUTE MAILING SYSTEMS, INC.

Principal Place of Business
1428 MARCHECK STREET
JACKSONVILLE FL 32211
US

Mailing Address
1428 MARCHECT ST
JACKSONVILLE FL 32211
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/30/1989
3a. Date of Last Report: 05/17/1994

2. Principal Place of Business
21 520 South Adams St.
Suite Apt # etc.
22
City & State
23 Beverly Hills FL
Zip 24 34465
County 25 Citrus

2a. Mailing Address
26 520 South Adams St.
Suite Apt # etc.
27
City & State
28 Beverly Hills Florida
Zip 29 34465-4345
County 30 Citrus

4. FEI Number: 59-2958490 — Applied For / Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PARKER, NANCY
1428 MARCHECK STREET
JACKSONVILLE FL 32211

10. Name and Address of New Registered Agent

81 Name
82 Street Address P.O. Box Number is Not Acceptable: 520 South Adams St.
83
84 City: Beverly Hills FL
85 Zip Code: 34465

11. Pursuant to the provisions of Sections 607.0505 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose 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

12. OFFICERS AND DIRECTORS

TITLE	PTS
NAME	PARKER, NANCY
STREET ADDRESS	3500 UNIVERSITY BLVD #2632
CITY ST ZIP	JACKSONVILLE FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 1

TITLE	☒ Change ☐ Addition
NAME	
STREET ADDRESS	520 South Adams St.
CITY ST ZIP	Beverly Hills Fl 34465
TITLE	Director ☐ Change ☒ Addition
NAME	E.W. PARKER
STREET ADDRESS	520 South Adams St.
CITY ST ZIP	Beverly Hills FL 34465
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	

14. I do hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. Further certify that the information indicated on the 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.

SIGNATURE: Nancy L Parker NANCY L. PARKER — 29 April 1995 — (904)527-4116

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0017232 CP