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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

L41029

(4)

RATER PROMOTIONAL MARKETING, INC.

Principal Place of Business

Mailing Address

P O BOX 22125 ST PETERSBURG EL 3 P O BOX 22125



ST. PETERSBURG FL 33742		ST. PETERSBURG FL 33742					
					3. Date Incorporated or Qualified 01/09/1990	3a. Date of Last 02/22/	
R. Principal Plac		2a. Mailing Address			4. FET Number 59-2984679		Applied For
17160 Suite, Apt. #,	holds Walk NE	26		·	39-2904079		Not Applicab
Suite, Apr. #.	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required
Gy & Stale	Ha GA	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
-2ip ¯ 1	Country	Zip	Coun	lry	8. This corporation has liability for		s 199.032,
500	9. Name and Address of Current	29	30			□No	
	s. Name and Address of Content	negisiered Agent		Name	10. Name and Address of New R	legistered Agent	
KORTH, KEVIN W.							
		[6	Street Add	ress (P.O. Box Number is Not Acceptab	ole)		
4563 CENTRAL AVENUE ST. PETERSBURG FL 33713		83		13			
						···	
			8	4 City		FL 85 Z	ip Code
or registered	d agent, or both, in the State of Florida , and accept the obligations of, Section	a. Such change was author.	zed by the ca	rporation's boa	ration submits this statement for the pur and of directors. Thereby accept the appe	pose of changing its pintment as registere	d agent. I ani
gnature :	greature, typod or pointed name of registered against a	no to viliapy I sabity (N	IOTE: Rogistered A	gent signarure resoure	or where new stating)	DATE	
•	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		ORS IN 12
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4. To nereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, so on an attachment with an address.

SIGNATURE: _<

SIGNATURE AND TYPED OF PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

1-19-96

770-565-4783

Destrue Pinne #