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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

L47504

(0)

FUTURE MARKETING, INC.

Principal Place C/O MICHAEL 13320 SW 128	Mailing Address C/O MKHAEL J. ZIMMERI 13320 SW 128TH ST.	ERMAN							
MIAMI FL 3311	96	MIAMI FL 33186-5807				3. Date Incorporated or Qualified 01/30/1990		ate of Last Re 25/1996	eport
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	1 01/		plied For
21		26	26			59-2378774		<del></del>	t Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stati	0	City & State	¬			6. Election Campaign Financing		\$5.00	
23	Country	<b>28</b> Zip	Coun		<del></del>	Trust Fund Contribution	<u> </u>	Added I	
Ζιρ <b>24</b>	Country 25	i	30	try		<ol> <li>This corporation has liability for Florida Statutes</li> </ol>	intangible Yes		199.032,
24	9. Name and Address of Cur		301			10. Name and Address of New Re			
71M	MERMAN, MICHAEL J.			B1	Name				
13320 SW 128TH ST.				32	Street Addre	ss (P.O. Box Number is Not Accepta	ole)		
MIA	MI FL 33186			1					
			,	83					
			Ī	B4	City		EI	85 Zip (	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607,1508, Florida Statute	es, the abo	 1-evo	named corpo	ration submits this statement for the	ourpose of	changing it	s registered
office or r	egistered agent, or both, in the St m familiar with, and accept the ob-	ate of Florida. Such change was a hoations of, Section 607,0505, Flo	uthorized rida Statu	by thes.	he corporation	n's board of directors. I hereby acce	pt the app	ointment as	registered
SIGNATURE	,								
	Signature, typed or printed name of registered			Agent	signature requirer	when reinstating)	DATE		
12.	·	AND DIRECTORS	13.		<del></del>	ADDITIONS/CHANGES TO OFFI	ZERS AND		
TITLE			1.1 TITE					Change	Addition
NAME	PACKER, BARRY E. 9600 NW 25TH ST.		1.2 NAN		nonceo				
STREET ADDRESS	MIAMI FL			1.3 STREET ADDRESS					
C/TY - ST - ZIP TITLE	DP	······································		1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition
NAME	-			22 NAME				C.Dgo	/ MG/(COII
STREET ADDRESS	9600 NW 25TH ST.		2 3 STREET ADDRESS		nnaess				
CITY-ST-ZIP	MIAMI FL		2. 4 CIT		Ì	:			
TITLE		DELETE	3.1 7/71					Change	Addition
NAME			3.2 NAM	Æ					
STREET ADDRESS			3.3 STR	EET A	DORESS				
CITY-ST-7P			3 4. CiT	γ- <u>\$</u> Ţ-	- ZIP				
TOTLE		DELETE	4.1 TITU	.E				Change	Addition
NAME			4. 2 NA	ME					
STREET ADORESS			4.3 STR	EET AC	DORESS				
CITY-ST-ZIP			4.4 CH		ZIP				
TITLE		DELETE	5.1 T(T)					Change	Addition
NAME			5.2 NA						
STREET ADDRESS			5.3 STR		1				į
City - St - ZIP		TT BELETE	54 CIT		ZIP			T 05	A arec.
TITLE		DELETE	61 TITL					L Change	Addition
NAMÉ I		•	62 NA						
STREET ADDRESS					DDRESS				
CITY - ST - ZIP			6.4 CiT	Y - ST -	2IP				

14. I do 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 admiral fescit or surplies central 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 correction or the correction of the correct

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS MTCHAELS 82P-6522

**FILED** 

Jan 17 1997 8:00am

Secretary of State