

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L54363**

(1)

1. Corporation Name

TELE-FAX MARKETING CORP.



Principal Place of Business

**116 SE 1ST ST
MIAMI FL 33131**

Mailing Address

**116 SE 1ST ST
MIAMI FL 33131**

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**JANKOVSKY, MISOO C
116 SE 1ST ST
MIAMI FL 33131**

3. Date Incorporated or Qualified

03/02/1990

3a. Date of Last Report

03/27/1995

4. FEI Number

65-0178861

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0702 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer 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 607.0606, Florida Statutes.

SIGNATURE

Signature of the person filing this report as the registered agent or director or officer

Signature of the Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

1. NAME
2. NAME
3. STREET ADDRESS
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964. CITY, STATE, ZIP
965. TITLE
966. NAME
967. STREET ADDRESS
968. CITY, STATE, ZIP
969. TITLE
970. NAME
971. STREET ADDRESS
972. CITY, STATE, ZIP
973. TITLE
974. NAME
975. STREET ADDRESS
976. CITY, STATE, ZIP
977. TITLE
978. NAME
979. STREET ADDRESS
980. CITY, STATE, ZIP
981. TITLE
982. NAME
983. STREET ADDRESS
984. CITY, STATE, ZIP
985. TITLE
986. NAME
987. STREET ADDRESS
988. CITY, STATE, ZIP
989. TITLE
990. NAME
991. STREET ADDRESS
992. CITY, STATE, ZIP
993. TITLE
994. NAME
995. STREET ADDRESS
996. CITY, STATE, ZIP
997. TITLE
998. NAME
999. STREET ADDRESS
1000. CITY, STATE, ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 30 96 (305) 372-5171

CR2E034 (12/95)