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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **L89706**

1. Corporation Name

CORPORATE MARKETING CONCEPTS, INC.

## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90227 009 \*\*\*150.00



	•						
Principal Place	e of Business	Mailing Address			T 19011071 EAN LOSIS (DIST (901) MANUS AUST AND	el Andir Beatl Ginit A	I BIT BIBIT I BBI
117 S. 21ST AVE.							
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020							
						DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed		\ 
	·				07/18/1990		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		olied For
21		26			65-0216797		Applicable
Suite, Apt. #, etc.				5. Certifcate of Status Desired	<b>\$8.75</b> A Fee Red		
22					<del> </del>		
				6. Election Campaign Financing Trust Fund Contribution	\$5.00 i		
28      Zip   Z		Country		8. This corporation owes the current year			
24			30		Personal Property Tax.		□No
	9. Name and Address of Current		<u> </u>		10. Name and Address of New Registere	d Agent	
			8	1 Name			
Diss	SETTE, BONNIE		· \_	<u> </u>	U.S. C. D. N. ber in Net Accordable)		_
2 <del>184 NE 63RD CT.</del> La30 NE 21 Lane FT LAUDERDALE FL 33308			8	2 Street A	Address (P.O. Box Number is Not Acceptable)		•
			8	3			
			Ĺ				
			8	4 City	F	85 Zip C	ode
11. Pursuant	to the provisions of Sections 607.0502	2 and 607,1508, Florida Statutes	s, the abo	ve-named o	corporation submits this statement for the purpose	of changing its	registered
office or r	registered agent, or both, in the State of	of Florida, Such change was autions of Section 607 0505. Flori	thorized b	y the corpo	ration's board of directors. I hereby accept the ap	oointment as reg	gistered
	Sommer II		ua Statute	"Misso	+b 41	1-199	
SIGNATURE	Signature, typed or printed name of registered agent	and title if appticable. (NOTE: 6	Registered Ag	ent signature re	equired when reinstating)	3/2/	
12.	OFFICERS AN	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
TITLE	PS	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	HESS, JANET E.		1.2 NAME	.			
STREET ADDRESS	117 S. 21ST AVE.		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-	ST-ZIP			
TITLE	VPT	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	HALL, BONNIE		2.2 NAME				
STREET ADDRESS	117 S. 21ST AVE.		2.3 STRE	ET ADDRESS			}
CITY-ST-ZIP	HOLLYWOOD FL		2. 4 CFTY	-ST-ZIP			_
TITLE	11.50	☐ DELETE	3.1 TITLE	- "	The state of the s	Change	Addition
NAME	1		3.2 NAME	:	•		Ì
STREET ADDRESS			3.3 STRE	ET ADDRESS		•	
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE			4.1 TITLE			Change	Addition
NAME	·	☐ DELETE				_	
STREET ADDRESS	l ,	☐ DELETE	4. 2 NAM	E		-	J
CITY-ST-ZIP		☐ DELETE	1	E ET ADDRESS			}
TITLE			1	ET ADDRESS			
		☐ DELETE	4.3 STRE	ET ADORESS ST-ZIP		☐ Change	Addition
NAME			4.3 STRE 4.4 CITY	ET ADDRESS ST-ZIP		☐ Change	Addition
NAME STREET ADDRESS			4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME	ET ADDRESS ST-ZIP	<u> </u>	☐ Change	Addition
		☐ DELETE	4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY-	ET ADORESS ST-ZIP ET ADORESS ST-ZIP			
STREET ADDRESS			4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STRE	ET ADORESS ST-ZIP ET ADORESS ST-ZIP	·	☐ Change	☐ Addition
STREET ADDRESS CITY+ST-ZIP		☐ DELETE	4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE 5.4 CITY-	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	·		

14. I 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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP