

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L94676** (8)

LIEBMAN MARKETING CORPORATION



Principal Office of Business: **7705 NW 73 TERR TAMARAC FL 33321**
Mailing Address: **7705 NW 73 TERR TAMARAC FL 33321**

2. Principal Office of Business: 21. Mailing Address: 22. State, Apt. #, etc.: 23. City & State: 24. Zip: 25. Country: 26. State, Apt. #, etc.: 27. City & State: 28. Zip: 29. Country: 30. Name and Address of Current Registered Agent: **LIEBMAN, ROBERT 7705 NW 73 TERR TAMARAC FL 33321**

3. Date Incorporated or Created: **08/21/1990** 3a. Date of Last Report: **01/13/1995**
4. FEI Number: **65-0212336** Applies 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 Statute: Yes No
10. Name and Address of New Registered Agent

81. Name: 82. Street Address (P.O. Box Number is Not Acceptable): 83. City: 84. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.04 and 607.1501, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the above address in the State of Florida. Change was authorized by the corporation's board of directors, thereby accepting the appointment as registered agent. I am hereby withdrawing the objection of Section 607.06(3), Florida Statutes.

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
<p>D</p> <p>LIEBMAN, ROBERT</p> <p>7705 NW 73 TERR</p> <p>TAMARAC FL</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
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14. I declare on my oath that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07, Florida Statutes. I further declare that the information indicated on this filing is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation, the resident or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name is printed in Block 12 or Block 13 of this report. I am currently furnished with this address.

SIGNATURE: *Robert Liebman* **Robert Liebman** **1/19/96** **954-721-8430**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)