2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L94722 1. Entity Name PRO/MARK GROUP, INC.					FILED Jan 18, 2001 8:00 am Secretary of State 01-18-2001 90017 001 ***158.75			
Principal Place of Business 20 S. 10TH ST. FERNANDIANA BEACH FL 32034 US		Mailing Address 28 S. 10TH ST. FERNANDIANA BEACH FL 32034 US		-	6 0 4 (•	14 616 61 (60 1	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		7	DO NOT WRITE IN THI	S SPACE		
City & Stat	le	City & State		4.	FEI Number 59-3028579		oplied For of Applicable	
Zip	Country	Zip	Çountry	- 5.	Certificate of Status Desired	Fee Require		
209	NING, GEORGE W., JR. W Church St (Sonville FL 32202 -		Street Addres	5	W. Babning Jr. Box Number is Not Acceptables 2011 1046 31. IdiNa Beach F	L Zip Cod	ว้อน	
Tax filing i	Signature, typed or printed name of registered agent an pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! After MAY 1, 200	Pegistered Agent signature requi PEE IS \$150.00 Pee will be \$550.00 to Department of S)	ainstating) DATE 10. Election Campaign Financing Trust Fund Contribution.	\$5.0	O May Be to Fees	
11.	OFFICERS AND D		12.	A	DITIONS/CHANGES TO OFFICERS A			ŝ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Banning, George W., Jr. 28 South 10th Street Fernandina Beach Fl. 32034	🗋 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			🗌 Change	Addition	CR2E034 (10/00)
TITLE NAME STREET ADDRESS	DVS Banning, Jeannette G. 28 South 10 Street Fernandina Beach FL 32034	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		- · · · · ·	Change	Addition	CR2
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS		Delete	TITLE NAME STREET ADDRESS			Change	Addition	

13. 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 report or supplemental report is true and accurate and that my signalure 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 visite empowered to exercise and that my signalure 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 visite empowered to exercise this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other information provided by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with a address, with all other information of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the receiver of the receiver of the corporation or the receiver of visite empowered to exercise this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with address, with all other information of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the corporation of the receiver of the corporation of the receiver of the corporation of t

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

01-04-00 Date

Daytime Phone #

CITY-ST-ZIP