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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

FILED

May 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1, Corpora	ation Name D MARKETIN	LOOT	84	(6)								III a faii 1 7 41
Principal Place of Business			М	Mailing Address				-	III OLOLOVOL DAV		IA OIDA IBOI	
5364 EHRLICH ROAD				5364 EHRLICH ROAD								
SUITE 107			8	SUITE 107				50.107.1	DITE 41 TO 110			
TAMPA FL 33624			Ť	TAMPA FL 33624				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
									08/15/1990	iisu		
2. Principa	al Place of Busin	1055	28.	2a. Mailing Address				4. FEI Number		TA	pplied For	
21	n			26				59-3025915			lot Applicable	
Suite, Apt. #, etc				Suite, Apt. #, etc.				5. Certificate of Status Desire		T	Additional	
City & State			27	City & State							lequired	
			201	28					 Election Campaign Financi Trust Fund Contribution 	ng [7]		May Be to Fees
23 Zip	ip Country			Zip Country					This corporation owes or hard			
24		25	29	,	30	,			Personal Property Tax due	•		ilangibie □ No
	g, Name	rrent Regis	t Registered Agent					10. Name and Address of New Registered Agent				
l (LEIMKUEHLER	, mark				81	Nam	е				
5364 EHRLICH ROAD						82 Street Addre			ss (P.O. Box Number is Not Acc	ptable)		
SUITE 107												
TAMPA FL 33625												
						84	City			FL	85 Zip	Code
11. Pursua	ant to the provis	ons of Sections 607	.0502 and 6	07.1508. Florida St	atutes th	ne above	e-name	d corno	ration submits this statement for	the purpose of	e	its registered
office o	or registered ag	ent, or both, in the S	State of Flori	da. Such change w	as autho	rized by	the co	prporatio	ration submits this statement for in's board of directors. I hereby a	accept the ap	pointment a	s registered
SIGNATUR		in, and anocyte inc.	inigalians o	1, 000001 007.0303	, rionua	Statutes	.					
SIGNATUR		or printed name of eigistim	nd agent and fille	d applicable ((NOTE Beg	stered Age	ant signat	re required	(when reinstating)	DATE		
12,	<u>-</u>	OFFICERS	AND DIREC			13.		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO C	FFICERS AN		
TITLE	D			☐ DELETE		1.1 TITLE					Change	☐ Addition
NAME	DAESS 15807 HOUND HORN			1.2 N								
STREET ADDRES		FL 33624				1.3 STREET		8				
CITY-ST-ZIP TITLE	D	rL 33024		DELETE		1.4 CITY - S 2.1 TITLE	1-ZIP				Change	Addition
NAME		EHLER, CATHY				2.2 NAME						
STREET ADDRES		OUND HORN				2.3 STREET	ADORESS	,				
CITY-ST-ZIP		FL 33624				2 4 CITY-S				•		
TITLE				DELETE	3	3 1 TITLE			- III III III III III III III III III I		Change	☐ Addition
NAME	1				3	3.2 NAME						
STREET ADDRES	ss				3	3.3 STREET	ADDRESS	3				
CITY-ST-ZIP				Drive		3.4. CITY - S	ST-ZIP	 			<u> </u>	[7] 1 1 mm
TITLE				☐ DELETE	1	4.1 TITLE					Change	Addition
NAME STREET ADDRES						4. 2 NAME						
CITY-ST-ZIP	35					4.3 STREET		'				
TITLE				☐ DELETE		4.4 CITY - ST 5.1 TITLE	1 - ZIP				Change	Addition
NAME	ĺ					5.2 NAME						
STREET ADDRES	ss					5.3 STREET	ADDRESS	;				
CITY-ST-ZIP						5.4 CITY - \$1						
TITLE				DELETE	6	6.1 TITLE		1	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME					6	6.2 NAME						
STREET ADDRES	\$S				6	6.3 STREET	ADORESS	;				
CITY-ST-ZIP	l and the state of	leface.		hina dana dan		6 4 CITY - ST						
indicati officer	led on this annu- or director of th	al report or supplem	ental annua Acceiver or l	l report is true and trustee ampowered	accurate	and tha	at mv s	ionature	ection 119.07(3)(i), Florida Statut shall have the same legal effect red by Chapter 607, Florida Statu	as if made ur	nder oath: th	attam an l