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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M21101

(4)

HOWETT MARKETING INC.

Principal Place of Business 2905 POINT ST. #L601 NORTH MIAMI BEACH FL 33160	Mailing Address 2905 POINT EST. DR. #LEO1 NORTH MIAMI BEACH FL	33160		
US	US		 Date Incorporated or Qualified 09/25/1985 	3a. Date of Last Report 05/01/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite Ap: #, etc	Suite, Apt. #, etc.		65-0084462	Not Applicable
22]	27		Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for	
24 25	29	30	Florida Statutes 10. Name and Address of New R	Yes No
9. Name and Address of Currer	ir vedisieien wäeiit	B1 Name	to. Name and Address of New M	ofisialan whalir
BIRNBAUM, ROSALIE 2905 POINT EAST DR.				
MIAMI FL 33160		82 Street Add	ress (P.O. Box Number is Not Accepta	able)
Miradi FE 55100		83		
				Jeel 7:0 Code
		84 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig SIGNATUR! Signor to but to protect name of registered agent.	of Florida, Such chan ge was ations of, Section 607.0505, Fl	authorized by the corpora orida Statutes. [E. Registered Agent signature required]	tion's board of directors. I hereby acce	purpose of crianging its registered appointment as registered
	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TOTLE V	DELETE	1.1 TITUE		Change Addition
NAME BIRNBAUM, MARK D.		1.2 NAME		
STREEL ADDRESS 981 N.W. 169TH ST.		1.3 STREET ADDRESS		ļ
CITY-ST-ZIP N. MIAMI BCH. FL		1.4 CITY - ST - ZIP		
TIFLE P	☐ DELETE	21 TALE		Change Addition
NAME BIRNBAUM, ROSALIE		22 NAME		ļ
STREET ADDRESS 2905 POINT EAST DR.		2.3 STREET ADORESS		
CITY-S1-7IP MIAMI FL 33160	DELETE	2.4 CITY-ST-ZIP		: Change Addition
7/III5	T) ntrut	3.1 TITLE 3.2 NAME		t 1. / L. Change L. Addition
NAME STREET ADDRESS		3.3 STREET ADDRESS		
CHY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4 2 NAME		· ·
STREET ADDRESS		4 3 STREET ADDRESS		
CITY - ST - Zif?		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME:		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
C(TY+ST-Z)P		5.4 CITY-ST-ZIP		
THE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		ļ
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-SI-78P		6.4 City-St-ZIP		

14. I do 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.

SIGNATURE: