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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M77658

(6)

TECHNOLOGY MARKETING, INC.

Principal Place of Business		Mailing Address	Mailing Address				I B I I B FB FF WI	ØN PLBN BIBN	i 01011 1881	
13153 NORTH DALE MABRY SUITE 107 TAMPA FL 3361B US		13153 NORTH DALE MABRY Suite 107 Tampa Fl 33618-2410 US								
					3. Date Incorporated or Qualified			Report		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FEI Number		A	pplied For	
21		26	····			59-2886591	·		ot Applicable	
Suite, Apt.	#, QLG	Suite Apt. #, etc.	Stille Apt. #, etc.			5. Certificate of Status Desired		T	Additional Required	
City & State		City & State				6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip	Zrp Coun			8. This corporation has liability for intangible tax und			s. 199.032,	
24 25		29				-		Yes No		
	9. Name and Address of Curr	ent Registered Agent		04	N)	10. Name and Address of New Reg	istered A	(gent		
	ILTON, HUGH F.			81	Name					
1909 CURRY RD.				82 Street Address (P.O. Box Number is Not Acceptable)						
LUIZ	? FL 33549			B3		-				
				53						
				64	City		FL	85 Zip	Code	
11. Pursuant I office or re agent. I as SIGNATURE	to the provisions of Sections 607 D egistered agent, or both, in the Sta m familiar with, and accept the obt	502 and 607.1508. Florida State of Florida State of Florida. Such change wigations of, Section 607.0505	atutes, the a as authorize , Florida Sta	bove d by tutes	e-named cor the corpora s.	poration submits this statement for the pution's board of directors. I hereby accep	urpose of t the appo	changing i pintment as	its registered s registered	
	Significate hyperconjunited have of registered a			d Age	nt signature requ	ired when reinstating)	DATE			
12.		ND DIRECTORS	13.		· · · · · ·	ADDITIONS/CHANGES TO OFFIC	ERS AND	_		
THE	PD DELETE HAMILTON, HUGH F.		117					Change	Addition	
NAME STREET ADDRESS	1909 CURRY RD.		12 N		ADDDECC					
STREET ADDRESS	LUTZ FL				ADDRESS T. ZID					
TITLE	VD DELETE			1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition	
NAME	HAMILTON, ANN S.			2.2 NAME						
STREET ADDRESS	1909 CURRY RD.				ADDRESS					
CITY - \$1 - ZIP	LUTZ FL		2.40	OTY - S	ST-ZIP					
TITLE	ST DELETE		3.1 (1	3.1 TITLE				Change	Addition	
NAME	HAMILTON, ANN S.		3.2 N	3.2 NAME						
STREET ADDRESS	1909 CURRY RD.		33S	TREET	ADDRESS					
City-St-7iP	LUTZ FL		· · · · · · · · · · · · · · · · · · ·		ST-ZIP					
TITLE		☐ DELETE	4 1 TI	TLE				Change	Addition	
NAME			4 2 N	IAME						
STREET ADDRESS			43 S	TREET	ADDRESS					
CITY-ST-ZIP		- Desert		ITY-S	T-ZIP					
THILE		☐ DELETE	5 1 TI					Change	Addition	
NAME			52 N							
STREET ADDRESS					ADDRESS					
CITY-ST-7IP		DELETE		ITY - S	T-ZIP			Channe	Addata: a -	
HILF		L. J URLEIE	61T)		ļ			Change	☐ Addition	
NAME CIRECT ANNOISS			62N		ADDRESS					

64 CITY-S1-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.