FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 25 AM 8:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M94455** **(6)**

1. Corporation Name
INTERLECT MARKETING, INC.

Principal Place of Business	Mailing Address
C/O ESTRELLA V. BRANDON 242 S.E. CAPROL AVE SEBASTIAN FL 32958	C/O ESTRELLA V. BRANDON 242 S.E. CAPROL AVE SEBASTIAN FL 32958

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/16/1988
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business
21: 10929 US 1, #18, Bldg 1
22: Suite, Apt. #, etc.
23: City & State: Sebastian
24: Zip: FL
25: Country: 32958

2a. Mailing Address
26: P.O. Box 780186
27: Suite, Apt. #, etc.
29: City & State: Sebastian, FL
29: Zip: 32978
30: Country: Brevard

4. FEI Number: 59-2931667 ☐ Applied 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 Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BRANDON, ESTRELLA V.
242 S.E. CAPROL AVE
SEBASTIAN FL 32958

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 10929 US 1, #18, Bldg 1
83
84 City: Sebastian FL 85 Zip Code: 32958

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	11 TITLE	☒ Change ☐ Addition
NAME	BRANDON, RUSSELL	12 NAME	
STREET ADDRESS	242 S.E. CAPROL AVE	13 STREET ADDRESS	10929 US 1, #18, Bldg 1
CITY-ST-ZIP	SEBASTIAN FL	14 CITY-ST-ZIP	Sebastian, FL 32958
TITLE	VSD	21 TITLE	☒ Change ☐ Addition
NAME	BRANDON, ESTRELLA	22 NAME	
STREET ADDRESS	242 S.E. CAPROL AVE	23 STREET ADDRESS	10929 US 1, #18, Bldg 1
CITY-ST-ZIP	SEBASTIAN FL	24 CITY-ST-ZIP	Sebastian, FL 32958
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is currently furnished and 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: Russell Brandon 21 Apr 1995, 407-388-3536
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR (Daytime Phone #)

007A01 CP