2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000058309

Title:

Name:

Address:

City-St-Zip:

Entity Name: ZIP CODE TARGET MARKETING INC

() Delete

3471 N. FEDERAL HWY, #400

FORT LAUDERDALE, FL 33306

CROUCH, BRAD

FILED Mar 26, 2005 Secretary of State

Entity Nai	me: ZIP COD	E TARGET MARKETI	ING, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
3471 N. FE #400	EDERAL HIGH	WAY					
	ERDALE, FL 3	3306					
Current Mailing Address:				New Mailing Address:			
3471 N. FE #400	EDERAL HIGH	WAY					
	ERDALE, FL 3	3306					
FEI Number: 65-1016506 FEI Number Applied For ()			for () FEI Nui	El Number Not Applicable () Certificate of Status Desired ()			atus Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
400	JAY DERAL HWY ERDALE, FL 3	33306 US					
	named entity e of Florida.	submits this statemen	t for the purpose o	of changing it	ts registered o	ffice or register	red agent, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financin	g Trust Fund Contributio	n ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CROUCH, JAY 3471 N. FEDER	Delete RAL HWY, #400 DALE, FL 33306		Title: Name: Address: City-St-Zip:	CROUCH, JAY 3471 N. FEDER) Change ()Addi RAL HWY, #400 DALE, FL 33306	tion
Title: Name: Address: City-St-Zip:	REYNER, DALI 3471 N. FEDER	Delete E RAL HWY, #400 DALE, FL 33306		Title: Name: Address: City-St-Zip:	REYNER, DALI 3471 N. FEDER) Change ()Addi E RAL HWY, #400 DALE, FL 33306	tion
Title: Name: Address: City-St-Zip:	SHELDON, RO 3471 N. FEDER	Delete BERT RAL HWY, #400 DALE, FL 33306		Title: Name: Address: Citv-St-Zip:	()) Change()Addit	ion

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JAY V CROUCH II PRES 03/26/2005

() Change () Addition