2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000058309

1. Entity Name
ZIP CODE TARGET MARKETING, INC.

Principal Place of Business	Mailing Address
3471 N. FEDERAL HIGHWAY #400 FT. LAUDERDALE, FL 33306	3471 N. FEDERAL HIGHWAY #400 FT. LAUDERDALE, FL 33306

04122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1016506
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CROUCH, JAY
3471 N FEDERAL HWY
400
FT. LAUDERDALE, FL 33306

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000513298
04/29/06-80121-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	CROUCH, JAY
STREET ADDRESS	3471 N. FEDERAL HWY, #400
CITY-ST-ZIP	FORT LAUDERDALE, FL 33306
TITLE	D/S
NAME	REYNER, DALE
STREET ADDRESS	3471 N. FEDERAL HWY, #400
CITY-ST-ZIP	FORT LAUDERDALE, FL 33306
TITLE	CEO
NAME	SHELDON, ROBERT
STREET ADDRESS	3471 N. FEDERAL HWY, #400
CITY-ST-ZIP	FORT LAUDERDALE, FL 33306
TITLE	D
NAME	CROUCH, BRAD
STREET ADDRESS	3471 N. FEDERAL HWY, #400
CITY-ST-ZIP	FORT LAUDERDALE, FL 33306
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ _____ _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #