2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 20, 2007
Secretary of State

DOCUMENT# P00000077803

Entity Name: INCENTIVE MARKETING PLUS, INC.

Current Principal Place of Business:

4563 BEACON DR. W.
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

PO BOX 351569
JACKSONVILLE, FL 32235

New Mailing Address:

FEI Number: 59-3665400 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHLOSSER, TAMMY
4563 BEACON DR. W.
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ANTHONY, ROGER
Address: 420 LAFAYETTE AVENUE
City-St-Zip: WESTWOOD, NJ 076752822

Title: VCEO ( ) Delete
Name: SCHLOSSER, TAMMY
Address: 4563 BEACON DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete
Name: SCHLOSSER, TAMMY
Address: 4563 BEACON DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SCHLOSSER, TAMMY
Address: 4563 BEACON DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32225

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SCHLOSSER, DANIEL
Address: 4563 BEACON DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32225

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: TAMMY C. SCHLOSSER PD 06/20/2007

Electronic Signature of Signing Officer or Director — Date