2007 FOR PROFIT CORPORATION ANNUAL REPORT

May 31, 2007 08:00 A Secretary of State DOCUMENT # P01000009981 1. Entity Name PTS MARKETING, INC. Mailing Address Principal Place of Business 28410 ROYAL PALM DRIVE 28410 ROYAL PALM DRIVE PUNTA GORDA, FL 33950 PUNTA GORDA, FL 33950 05032007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1108411 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TRILLI, PATRICK DO NOT WRITE 28410 ROYAL PALM DRIVE PUNTA GORDA, FL 33950 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable DATE 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 Added to Fees corporation did not receive the prior notice. Trust Fund Contribution. Due by September 14, 2007 OFFICERS AND DIRECTORS 10. TITLE NAME TRILLI, PATRICK 28410 ROYAL PALM DRIVE STREET ADDRESS U00000765665 CITY-ST-ZIP PUNTA GORDA, FL 33950 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP -NAME

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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 od/hat my signature shall have the same legal effect as if made under oath; that I am an officer or director report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 i changed, or on an attachment wit

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

FILED