

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000023990

FILED
Aug 03, 2004
Secretary of State

Entity Name: MARKETING CONFIGURATIONS, INC.

Current Principal Place of Business:

640 DOUGLAS AVENUE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

3916 N 29TH AVENUE
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 59-3707332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPUR, RAJIV
640 DOUGLAS AVENUE
ALTAMONTE SPRINGS, FL 32714

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KAPUR, RAJIV
Address: 640 DOUGLAS AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: EVP () Delete
Name: KAPUR, ROBIN
Address: 640 DOUGLAS AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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.

SIGNATURE: RAJIV KAPUR

PRES

08/03/2004

Electronic Signature of Signing Officer or Director

Date