

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000023990

Entity Name: MARKETING CONFIGURATIONS, INC.

FILED  
Jan 25, 2007  
Secretary of State

## Current Principal Place of Business:

640 DOUGLAS AVENUE  
ALTAMONTE SPRINGS, FL 32714

## New Principal Place of Business:

1976 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

## 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      US

## Name and Address of New Registered Agent:

KAPUR, RAJIV  
1976 S ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703      US

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

01/25/2007

Date

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: P (X) Change ( ) Addition  
Name: KAPUR, RAJIV  
Address: 1976 S ORANGE BLOSSOM TRAIL  
City-St-Zip: APOPKA, FL 32703

Title: EVP (X) Change ( ) Addition  
Name: KAPUR, ROBIN  
Address: 1976 S ORANGE BLOSSOM TRAIL  
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the 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: RAJIV KAPUR-CONFIGURATIONS

P

01/25/2007

Electronic Signature of Signing Officer or Director

Date