2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000032444

Entity Name: THE DIRECT MAIL COMPANY

Apr 24, 2002 8:00 AM Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

343 DOUGLAS RD UNIT #3 11406 PALM PASTURE DR. OLDSMAR, FL 34677

TAMPA, FL 33635

Current Mailing Address: New Mailing Address:

8488 W HILLSBOROUGH AVE STE 158 8480 SHELDON RD. TAMPA, FL 33615

TAMPA, FL 33615

FEI Number: 59-3708636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TERZI, SAMUEL M TERZI, SAMUEL M 343 DÓUGLAS RD UNIT #3 11406 PALM PASTURE DR. TAMPA, FL 33635

OLDSMAR, FL 34677

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: 04/24/2002

> Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

TERZI, MELISSA Name: Name: TERZI, MELISSA 8488 W HILLSBOROUGH AVE STE 158 Address: 8480 SHELDON RD. #199 Address:

TAMPA, FL 33615 City-St-Zip: TAMPA, FL 33615 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: TERZI. SAMUEL M Name: TERZI. SAMUEL M 8488 W HILLSBOROUGH AVE STE 158 Address: 8480 SHELDON RD. #199 Address: TAMPA, FL 33615 TAMPA, FL 33615 City-St-Zip: 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 Statutés. 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: MELISSA TERZI 04/24/2002 D