2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000038886

Address:

City-St-Zip:

24 GLEN ROAD

GREENWICH, CT 06830

Entity Name: ADVANTAGE MARKETING INTERNATIONAL, INC.

FILED Mar 12, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1 COUNTRY ROAD 1630 POST ROAD EAST WESTPORT, CT 06880 US #313 WESTPORT, CT 06880 US **Current Mailing Address: New Mailing Address:** 1 COUNTRY ROAD 1630 POST ROAD EAST WESTPORT, CT 06880 US #313 WESTPORT, CT 06880 US FEI Number: 65-1102165 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HALLER, PAUL 6506 N W 37TH AVE COCONUT CREEK, FL 33073 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: **PRFS** (X) Change () Addition SLATER, HARVEY Name: Name: SLATER, HARVEY 1 COUNTRY ROAD 1630 POST ROAD EAST Address: Address: City-St-Zip: WESTPORT, CT 06880 US City-St-Zip: WESTPORT, CT 06880 US Title: VΡ Title: (X) Delete () Change () Addition Name: SLATER, TED Name: 94D BLACHLEY RD Address: Address: STAMFORD, CT 06902 US City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition SLATER, JON A Name: Name: 637 COVE ROAD Address: Address: City-St-Zip: STAMFORD, CT 06902 City-St-Zip: Title: (X) Delete Title: () Change () Addition SLATER, ANDREW Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: HARVEY SLATER PRES 03/12/2005