FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000078804

1. Entity Name

MAINSTREAM MARKETING SOLUTIONS, INC.

FILED Apr 29, 2002 8:00 am Secretary of State

04-29-2002 90082 038 ***150.00

639913

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Principal Place of Business 3. Mailing Address					1	•					
750 Fentress Blvd.		750 Fentress Blvd.			DO NOT WRITE IN THIS SPACE						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT MRITE IN THIS	SPAC	L			
					A =	El Number		Applied For			
City & State		City & State		4, [59- <u>3737092</u>		Not Applicable				
Daytona Beach, FL		Daytona Beach, FL						75 Additional			
Zip	Country	Zip 32114'	Count	ry	5 . C	Certificate of Status Desired		Required			
32114		32114			7. Na	me and Address of Current Registers	d Age	nt			
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	DO NOT W	DITE	1	Scott_	R. R	ost					
	DO NOT W	KIIE		Street Address (P.O. Box Number is Not Acceptable) 444 Seabreeze Blvd., Suite 800							
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		ACL		•				0011			
				CityDaytor	na Be	each F	$\lfloor \rfloor^2$	Zip Code 3211			
						are both in the State of Florida					
8. The above	named entity submits this statement for	r the purpose of changing its	registere	ed office or regist	ered age	ent, or doth, in the state of Florida.					
	nt - 1					April_12,	200	12			
SIGNATURE				d Agent signature requi	irod when ro		200				
SIGNATURE L	Signature, typed or primed name of registered agent a				red when te	a is table (y)					
• This saves	ration is clinible to satisfy its Intannible	January 1 - N	lay 1 Fe	e is \$150.00	•	10. Election Campaign Financing		\$5.00 May Be			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After May 1, Fe Amended UB				S \$550.00 e \$61.25	Trust Fund Contribution. Added to Fees						
	ia on back)	Make Check Payal	ole to De	partment of S	tate						
44	OFFICERS AND							····			
11.			TITL								
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplymental report is true and accorate 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address of the accordance of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address of the corporation of the

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 12,2002

Daytime Phone #

CR2E034B (12/01)