

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000116749

Entity Name: PERCENTAGE MARKETING, INC.

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

1505 E. MICHIGAN STREET
ORLANDO, FL 32806

New Principal Place of Business:

790 BALSA DRIVE
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

1505 E. MICHIGAN STREET
ORLANDO, FL 32806

New Mailing Address:

790 BALSA DRIVE
ALTAMONTE SPRINGS, FL 32714

FEI Number: 58-1219214

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, LUIS
809 IRMA AVENUE
SUITE 1
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

BUSCHLEN, LISA
790 BALSA DRIVE
ALTAMONTE SPRINGS, FL 32714 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: LISA BUSCHLEN

01/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: FARMER, STERLING A
Address: 1505 E. MICHIGAN STREET
City-St-Zip: ORLANDO, FL 32806

Title: DVT () Delete
Name: BUSCHLEN, LISA M
Address: 1505 E. MICHIGAN STREET
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: FARMER, STERLING A
Address: 313 RICHARD PLACE
City-St-Zip: ORLANDO, FL 32806

Title: DVT (X) Change () Addition
Name: BUSCHLEN, LISA M
Address: 790 BALSA DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: LISA BUSCHLEN

DVT

01/05/2007

Electronic Signature of Signing Officer or Director

Date