2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068171

Address:

City-St-Zip:

MELBOURNE, FL 32940

FILED Feb 12, 2004 Secretary of State

Entity Name: GIFT MARKETING ALLIANCE, INC. **Current Principal Place of Business: New Principal Place of Business:** 599 SHERWOOD AVE SUITE 107 SATELLITE BEACH, FL 32937 **New Mailing Address: Current Mailing Address:** 599 SHERWOOD AVE SUITE 107 SATELLITE BEACH, FL 32937 FEI Number: 03-0465984 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: PATTERSON, DAVID R 519 A N HARBOR CITY BLVD MELBOURNE, FL 32935 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: () Change () Addition HOLTZCLAW, EMMITT JR Name: Name: 374 CARMEL DRIVE Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: STD () Delete Title: () Change () Addition Name: HOLTZCLAW, EMMA Name: 374 CARMEL DRIVE Address:

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: EMMITT HOLTZCLAW JR PD 02/12/2004