2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

FILED Jan 31, 2005 08:00 AM DOCUMENT # P02000073975 **Secretary of State** 1. Entity Name RD GLOBAL MARKETING, INC. Mailing Address Principal Place of Business 177 N US HWY ONE #266 TEQUESTA FL 33465 210 PARK PLACE JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State 4. FEI Number City & State 56-2281331 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TINARI, HENRY A Street Address (P.O. Box Number is Not Acceptable) 210 PARK PL JUPITER FL 33458 Zip Code City FI 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition ☐ Delete 11177 Change TITLE NAME TINARI, HENRY A NAME STREET ADDRESS STREET ADDRESS 210 PARK PLACE CITY-ST-ZIP JUPITER FL 33458 CITY - ST - ZIP UTOTTOD204814 000000204814 _____change 01/31/05-80018-020 150.00 Addition TIFLE Delete into 6 NAME TINARI, MARILYN J STREET ADDRESS 210 PARK PLACE STREET ADDRESS CHY-SI-ZIP JUPITER FL 33458 CHY-SI-ZIP ☐ Change ☐ Addition TUTOF ☐ Delete THE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLTY-ST-ZIP ☐ Change ☐ Addition ETLE DILLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change mil NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CHY-ST-7P CITY-ST-ZIP 12. 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 supplemental report is true and accurate 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Davime Phone #