2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P02000135644

1. Entity Name

SIGNATURE:

BLINK MARKETING, INC.



FILED Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90180 024 ***150.00

							
	ce of Business	Mailing Address					
4125 TREE TOPS ROAD		4125 TREE TOPS ROAD					
COOPER CIT	Y'FL 33026	COOPER CITY FL 33026					
US		US				PHAN BURN BAN	
2. Principal Place of Business		3. Mailing Address 5722 8. Flamings Rd					
Suite, Apt. #, etc.		Suite, Apr. #, etc. #-250		CHECK HERE IF MAKING CHANGES			
City & Sta	te	City & State TOV+ / QUAL	dale FL	4. FEI Number 50 - 000 844		pplied For ot Applicable	
Zip	Country	33330	Country U.S.A	5. Certificate of Status Desired	\$8.75 Ad Fee Require		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent							
			Name CO V	Carolina Jumhans			
	POLO, WILLIAM V ESQ.		Street Address	s (P.O. Box Number is Not Accepta	ble)		
	TH FEDERAL HIGHWAY		4125	iree tops in	2		
6TH FLOOR							
FORT LAUDERDALE FL 33301				city	FL Zip Seg	50.47a T	
8. The above named entity submits this statement for the aurpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE (and fina lunghans Feb. 20, 2003							
Signature, typed or printed name of registers agent and title if applicable. (NOTE: Registered Agent signature requires men reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 S After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be							
After May 1, 2003 Fee will be \$550.00 See will be \$550.00 Trust Fund Contribution. Added to Fees							
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS/CHANGES TO O	FFICERS AND DIRECTOR	S IN 11	
TITLE	PRES	☐ Delete	TITLE	<u> </u>	☐ Change	Addition	
NAME	JUNGHANS, CAROLINA G		NAME		_ •		
STREET ADDRESS	4125 TREE TOPS ROAD		STREET ADDRESS				
CITY-ST-ZIP	COOPER CITY FL 33026		CITY-ST-ZIP				
TITLE NAME	VP	☐ Delete	TITLE NAME		☐ Change	Addition	
STREET ADDRESS	GARDNER, DANIEL C 741 N. PINE ISLAND ROAD APT.	207	STREET ADDRESS				
CITY-ST-ZIP	PLANTATION FL 33322	30 <i>1</i>	CITY-ST-ZIP				
TITLE	S/TR:	☐ Delete	TITLE		☐ Change	Addition	
NAME	JUNGHANS, CHRISTOPHER J	→	NAME	And the second s			
STREET ADDRESS	4125 TREE TOPS ROAD	,	STREET ADDRESS				
CITY-ST-ZIP	COOPER CITY FL 33026		CITY-ST-ZIP		<u></u>		
TITLE NAME		☐ Delete	TITLE		Change	☐ Addition	
STREET ADDRESS		<i>*</i>	NAME STREET ADDRESS				
CITY-ST-ZIP	·		CITY-ST-ZIP				
TITLE		Delete	TITLE		☐ Change	Addition	
NAME	•	30.00	NAME				
STREET ADDRESS			STREET ADDRESS	•			
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE		☐ Delete	TITLE		☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP		•		
12. I hereby d	certify that the information supplied with t	this filing does not qualify for	the exemption stated in S	Section 119 07(3Vi) Florida Statutor	I further certify that the in	nformation	
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.							