2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 16, 2005 8:00 am Secretary of State DOCUMENT # P03000002474 1. Entity Name 03-16-2005 90035 011 ***150.00 NATIONAL SALES & MARKETING GROUP, INC. Principal Place of Business Mailing Address 2244 S FEDERAL HWY #111 2244 S FEDERAL HWY #111 /VWI1// STUART FL 34994 STUART FL 34994 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 55-0813562 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Bequired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DEVINE, ROY JR 525 SW SOUTH CAROLINA DRIVE Street Address (P.O. Box Number is Not Acceptable) STUART FL 34994 City Zip Code 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be 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 President Dr. Roy Devine Jr. 525 Sw South Carolina Drive PD Change TITLE TITLE ☐ Addition Delete DEVINE, ROY NAME NAME STREET ADDRESS. 103 US HWY-1-STE-F6115 STREET ADDRESS CITY-ST-ZIP JUPITER FL 33477---CITY-ST-ZIP 3tuart F1.34994 STD Secttreas Judith Devine Defete TITI F ☐ Addition NAME GETGOOD, JUDITH NAME 525 SW South Carolina Drive STREET ADDRESS 103 US HWY 1 STE F5115 STREET ADDRESS JUPITER FL 33477 CITY-ST-7IP CITY-ST-7IP Sturt, F1. 34994 TITLE ☐ Delete TIDE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

FILED