2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000006631

1. Entity Name

DYNAMIC TV MARKETING, INC.



FILED Apr 25, 2008 08:00 AM Secretary of State

Principal Place of Business

4152 WEST BLUE HERON BLVD

SUITE 104

WEST PALM BEACH, FL 33404

Mailing Address

4152 WEST BLUE HERON BLVD

SUITE 104

WEST PALM BEACH, FL 33404



DO NOT WRITE IN THIS SPACE

02202008 No Chg-P CR2E034 (11/05)

4. FEI Number 55-0814582

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARKEY, STEPHEN T 4152 WEST BLUE HERON BLVD SUITE 104 WEST PALM BEACH, FL 33404

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plans of registered agent.	ourpose of changing its register	ed attice or r	egistered agent, or b	oth, in the State of	Florida, 1 am fam	iliar with, and accept
SIGNATURE.							
Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered			id Agent signature	Agent signature required when renstating) DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Final Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	U000 05/15/0	00921945 18-80026-0	24 150.00. j
10.	OFFICERS AND DIREC	CTORS	7.7. 4.200 (A)	V 7808 8 (4 (5)		de van de de	
NAME STREET ADDRESS CITY-ST-ZIP	PRES HARKEY, STEPHEN 4152 WEST BLUE HERON BLVD SUI WEST PALM BEACH, FL 33404	TE 104					
name Street aduress City-St-Zip							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT V	VRITE	
DITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THISS	PACE	
NAME STREET ADDRESS							

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under early 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 air other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF GIGNING OFFICER OR DIRECTOR

Date

Daytme Phone #