

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008444

FILED  
Apr 20, 2005  
Secretary of State

Entity Name: BML MARKETING COMPANY, INC.

**Current Principal Place of Business:**

2790 OCEAN SHORE BLVD.  
#4N  
ORMOND BY THE SEA, FL 32176

**New Principal Place of Business:**

**Current Mailing Address:**

2790 OCEANSHORE BLVD.  
APT. #4N  
ORMOND BY THE SEA, FL 32176

**New Mailing Address:**

FEI Number: 45-0497245      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LUPOLI, BILL  
2790 OCEAN SHORE BLVD.  
#4N  
ORMOND BY THE SEA, FL 32176 US

**Name and Address of New Registered Agent:**

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:**

Title: PT ( ) Delete  
Name: LUPOLI, BILL  
Address: 2790 OCEAN SHORE BLVD.  
City-St-Zip: ORMOND BY THE SEA, FL 32176

Title: S ( ) Delete  
Name: TONER, MARY  
Address: 2790 OCEAN SHORE BLVD #4N  
City-St-Zip: ORMOND BY THE SEA, FL 32176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
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 Statutes. 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: BILL LUPOLI

PT

04/20/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date