2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 26, 2005 08:00 AM Secretary of State

DOCUMENT # P03000056088 1. Entity Name PURPLE MARKETING INC.				Secretary of State		
1537 SARA	ce of Business GOSSA AVENUE LES, FL 33134	Mailing Address 1537 SARAGOSSA AVENUE CORAL GABLES, FL 33134				-
				02232005	No Chg-P	CR2E034 (10/03)
	ONO MANAGE	IN THIS SPA	CE	4. FEI Numb	er	Applied For Not Applicable
	ik Green	a despective			of Status Desired	\$8.75 Additional Fee Required
	5. Name and Address of Current Reg ANE AGOSSA AVENUE ABLES, FL 33134	i colonia		NOT W IFIS SP		
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. Note: Registered Agent signature required when releasating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be 03/25/05-80007-010 150.00						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financian Trust Fund Contribution.				00 May Be ad to Fees	U3/ <i>2</i> 5/U5	-8UUU/-UIU 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR D ATKINS, LANE 1537 SARAGOSSA AVENUE CORAL GABLES, FL 33134	ECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			Secretary of the secret		NOT W THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP						
 i hereby c indicated of the corp changed, 	ertify that the information supplied with this on this report or supplemental report is true obration or the receiver or trustee empower or on an attachment with an address, with	filing does not qualify for the exe and accurate and that my signat ed to execute this report as requi all other like empowered.	mption stated in Sec ture shall have the st red by Chapter 607,	tion 119.07(3)(ame legal effec Florida Statute	i), Florida Statutes. I fit as if made under oas; and that my name	further certify that the information ath; that I am an officer or director appears in Block 10 or Block 11 if

HTUUS LANE ATKINS
TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR