

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000103695

FILED
Apr 27, 2005
Secretary of State

Entity Name: CERTIFIED MARKETING CONSULTING, INC.

Current Principal Place of Business:

6120 N FEDERAL HWY
BOCA RATON, FL 33487

New Principal Place of Business:

5528 AMERICAN CIRCLE
DELRAY BEACH, FL 33484

Current Mailing Address:

6120 N FEDERAL HWY
BOCA RATON, FL 33487

New Mailing Address:

C/O MURRAY J COHEN P.C. 10330 CAMELBACK LN
BOCA RATON, FL 33498

FEI Number: 20-0247241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CID, X
6120 N FEDERAL HWY
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

MURRAY J COHEN P.C.
10330 CAMELBACK LANE
BOCA RATON, FL 33498 US

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: MURRAY J COHEN P.C.

04/27/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CID, X
Address: 6120 N FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33487

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: CROKE, JEREMIAH
Address: 5528 AMERICAN CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: MRS () Change (X) Addition
Name: CROKE, DETRA
Address: 5528 AMERICAN CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484 US

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: JEREMIAH CROKE

PRES

04/27/2005

Electronic Signature of Signing Officer or Director

Date