2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164284

GOLDIN, LEV Í CEO

14790 BONAIRE BLVD. 302

DELRAY BEACH, FL 33446 US

Name:

Address:

City-St-Zip:

Entity Name: U.S. CENTER OF MARKETING, INC

FILED Feb 14, 2008 Secretary of State

-		,			
Current Principal Place of Business:			New Principal Place of Business:		
14790 BONA DELRAY BEA					
Current Mailing Address:			New Mailing Address:		
14790 BONA DELRAY BEA					
FEI Number: 20	0-1971402	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and A	ddress of	Current Registered Agent:	Name and Address o	f New Registered Agent:	
GINZBURG, 14790 BONA DELRAY BEA	NRE BLVD ACH, FL 3	3446 US			
The above no in the State of		submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE	<u>:</u>				
	Electro	onic Signature of Registered A	gent	Date	
Election Camp	aign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Name: [Address:	DOBSON, OL 14790 BONAI) Delete GA SEC RE BLVD. 302 CH, FL 33446 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: 0 Address: 7	GINZBURG, F 14790 BONAI) Delete ROBERT J PRESIDE RE BLVD. 302 CH, FL 33446 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: 0 Address: 0	GINZBURG, Ì 14790 BONAI) Delete ARISA TRESURE RE BLVD. 302 CH, FL 33445 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: 0	CEO () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT GINZBURG PRES 02/14/2008