2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000085914

Entity Name: STRATECIC MARKETING INSIGH

FILED Mar 01, 2007 Secretary of State

Entity Name: STRATEGIC MARKETING INSIGHTS INC.						
Current Principal Place of Business:				New Principal Place of Business:		
	ERWITCH PO), FL 32806	DINT DRIVE				
Current Mailing Address:				New Mailing Address:		
	ERWITCH PO), FL 32806	DINT DRIVE				
FEI Number:	20-3018136	FEI Number Ap	plied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address	Name and Address of New Registered Agent:	
CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 US				4703 WATERWITC	BAZANTE, JENNIFER M 4703 WATERWITCH POINT DRIVE ORLANDO, FL 32806 US	
The above in the State		submits this stat	ement for the pu	rpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE: JENNIFER M. BAZANTE					03/01/2007	
	Electro	nic Signature of F	Registered Ager	nt	Date	
Election Can	npaign Financin	ng Trust Fund Cont	ribution ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BAZANTE, JEN	WITCH POINT DRIVE	.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BAZANTE, JOS	WITCH POINT DRIVE	:	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MUMBY, PEG	WITCH POINT DRIVE	Ē	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP (MUMBY, ROB) Delete ERT C		Title: Name:	() Change () Addition	

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

Address:

City-St-Zip:

SIGNATURE: JENNIFER M. BAZANTE PD 03/01/2007

4703 WATERWITCH POINT DRIVE

ORLANDO, FL 32806

Address:

City-St-Zip: