FILED Feb 21, 2006 8:00 am Secretary of State 01-23-2006 90044 032 ***158.75

2006 FOR PROFIT CORPORATION ANNUAL REPORT

1. Entity Name	MENT # P05000143 RE MARKETING, INC.	624				01 2 5 2 000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.50.75
Principal Place									
23110 STATE #234	ROAD 54		1	e c	004.5				
LUTZ, FL 33	549 			0 0 10 10 10 10 10 10 10 10	0019	16			
2, Principal Pl / 44 9 9 Suite, Apl.	11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	labry Huy				AIF BAU ABU AI			
SVIT			01182008	Chg-P	CR2EC	134 (11/05) 			
City & State	City & State TAMPA FL City & State TOMPA FL				4. FEI Numb	261918		No	plied For Applicable
^{zip} 33	618 coursey SA	33618	Coun	š A	<u> </u>	of Status Desired	×	\$8.75 Add Fee Required	itional d
-	5. Name and Address of Current	Name	7, Name an	d Address of New R	egistered	Agenii			
ROSARIO, 23110 STA #234	, NOEL E ATE ROAD 54	Street Address (P.O. Box Number is Not Acceptable)							
LUTZ, FL	33549								
1				City			FL	Zip Code	•
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 lamiliar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or priviled nerve of regretative dispertative (INOTE: Registered Agains spreadure regulatory) OATE									
FILE NOWN: FEE 83 \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND		11.		ADDITIONS	/CHANGES TO OFF	ICERS AND		
TITLE	P ROSARIO, NOEL E	Celete	TITLE					Change	☐ Addition
STREET ADDRESS	ISS 23110 STATE RD 54 #234 ST			ET ADORESS -SI-ZIP					į
CITY-ST-ZIP			THE					☐ Change	Addition
NAME	MARINO, GARY	□ Descre	NAM						
STREET ADDRESS CITY-ST-ZTP	23110 STATE RD 54 #234 LUTZ, FL 33549			ET ADORESS - ST-ZIP					
TITLE	Detere 13							Change	☐ Addition
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STREET ADDRESS CITY-ST-ZIP				ET ADDRESS - ST- DP					ļ
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CITY-ST-ZIP			- 1	·\$1- <i>71</i> 9					
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MAKE	□ Defete na						Change	Addition	
STREET ADDRESS			1	ET ADDRESS					
CITY-SI-ZIP	<u> </u>			·\$1-2P					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE: AND TYPETO OF ENTITY MANY OF ENTITY OF PARTY OF THE PROPERTY OF THE									



January 28, 2006

E VENTURE MARKETING, INC. 14499N DALE MABRY HWY #170 TAMPA, FL 33618

Subject: E VENTURE MARKETING, INC.

Reference Number:

P05000143624

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RM ANNUAL REPORTS SECTION