2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State
04-04-2008 90028 046 ***150.00

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1. Entity Name
FOCUS MARKETING ADVISORS INC

Principal Place of Business	Mailing Address
12300 ALTERNATE A1A SUITE 105 PALM BEACH GARDENS, FL 33410 US	12300 ALTERNATE A1A SUITE 105 PALM BEACH GARDENS, FL 33410 US

03312008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
12300 Alternate A1A	12300 Alternate A1A
Suite, Apt. #, etc.: SUITE 203	Suite, Apt. #, etc.: Suite 203
City & State: Palm Beach Gardens FL	City & State: Palm Beach Gardens FL
Zip: 33410 Country: US	Zip: 33410 Country: US

4. FEI Number: 20-3975951 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MILLER, JOHN P 2499 GLADES ROAD SUITE 305A BOCA RATON, FL 33431	Name Street Address (P.O. Box Number is Not Acceptable) 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 familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ALLICKSON, BRITTANY 12300 ALTERNATE A1A SUITE 105 PALM BEACH GARDENS, FL 33410	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 12300 Alternate A1A Suite 203 Palm Beach Gardens, FL 33410	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DELAK, VICKI 12300 ALTERNATE A1A SUITE 105 PALM BEACH GARDENS, FL 33410	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 12300 Alternate A1A Suite 203 Palm Beach Gardens FL 33410	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary / Treasurer (S,T) ☐ Change ☑ Addition Simons, Tim 12300 Alternate A1A Suite 203 Palm Beach Gardens FL 33410	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing 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: Brittany Allickson APRIL 1, 2008 954 682-9868
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #