

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000009847

FILED
Jul 08, 2008
Secretary of State

Entity Name: NICHOLAS & ASSOCIATES MARKETING, INC.

Current Principal Place of Business:

11022 SW 129TH PLACE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

11022 SW 129TH PLACE
MIAMI, FL 33186

New Mailing Address:

FEI Number: 20-4239819

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE CERCE, NICHOLAS
11022 SW 129 PL
MIAMI, FL 33180 US

Name and Address of New Registered Agent:

DE CERCE, NICHOLAS
11022 SW 129 PL
MIAMI, FL 33186 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:

07/08/2008

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: VTD () Delete
Name: DE CERCE, RAYMOND P
Address: 11022 SW 129TH PLACE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: DE CERCE, SUSAN M
Address: 11022 SW 129TH PLACE
City-St-Zip: MIAMI, FL 33186

Title: P (X) Delete
Name: DE CERCE, NICHOLAS
Address: 11022 SW 129 PL
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DECERCE, NICHOLAS
Address: 11022 SW 129 PLACE
City-St-Zip: MIAMI, FL 33186 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: SUSAN DECERCE

D

07/08/2008

Electronic Signature of Signing Officer or Director

Date