FILED Jan 30, 2008 8:00 am 2008 FOR PROFIT CORPORATION ANNUAL REPORT **Secretary of State** DOCUMENT # P06000052410 01-30-2008 90028 045 ***150.00 1. Entity Name S MARKETING, INC. Principal Place of Business Mailing Address quv-468 WEST 51 PLACE 468 WEST 51 PLACE HIALEAH, FL 33012 HIALEAH, FL 33012 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01142008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 20-4973316 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YAKIR, DANNON Street Address (P.O. Box Number is Not Acceptable) 468 WEST 51 PLACE HIALEAH, FL 33012 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change Addition NAME DANNON, YAKIR NAME STREET ADDRESS 2320 NE 211 STREET STREET ADDRESS CITY-ST-ZIP N MIAMI BEACH, FL 33181 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME FRANCO, ISRAEL NAME STREET ADDRESS 2 WEST WAY STREET ADDRESS CITY-ST-ZIP CHAPPAQUA, NY 10514 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME ABADY, DAVID STREET ADDRESS 2110 NE 214 STREET STREET ADDRESS CITY-ST-ZIP N MIAM! BEACH, FL 33179 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FIRTELL, STEPHEN NAME STREET ADDRESS 25272 STILLWELL PKWY STREET ADDRESS CITY-ST-ZIP BOYITA SPRINGS, FL 34135 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME FIRTELL, THERESA NAME STREET ADDRESS 25272 STILLWELL PKWY STREET ADDRESS BOYITA SPRINGS, FL 34135 City-St-7IP CITY-ST-7/P TITLE ☐ Defete TITLE ☐ Change M Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/25/08

305215-9027

Daytime Phone #