2008 FOR PROFIT CORPORATION ANNUAL REPORT

05-23-2008 90017 039 ***150.00
P07000004547

DOCUMENT # P07000004547

1. Entity Name
DCJ GLOBAL MARKETING, INC.

Principal Place of Business	Mailing Address
1131 CHENILLE CIRCLE WESTON, FL 33327	1131 CHENILLE CIRCLE WESTON, FL 33327

03052008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1667 Bunting Ln	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Weston	City & State: FL 33327
Zip / Country	Zip / Country

4. FEI Number ☑ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MARQUEZ, BETTY
5551 NW 113 PL
MIAMI, FL 33178

7. Name and Address of New Registered Agent

Name: Adriana Marquez
Street Address (P.O. Box Number Is Not Acceptable): 1667 Bunting Ln
City: Weston FL Zip Code: 33327

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: Adriana Marquez DATE: 03/13/08
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 QUINTANA, JOSE L 1131 CHENILLE CIRCLE WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1667 Bunting Ln Weston, FL 33327
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MARQUEZ, ADRIANA 1131 CHENILLE CIRCLE WESTON, FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1667 Bunting Ln Weston, FL 33327
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

FILED
2008 SEP 23 A 9 36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: ______ 03/05/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #