2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 21, 2008 8:00 am Secretary of State

DOCUMENT # P07000077145 1. Entity Name MINDMARK MARKETING, INC.					07-21-2008 90028 008 ***150.00			
Principal Plac	ce of Business	Mailing Address	<u>.</u>		1			
4531 SHERIDAN AVE Miami Beach, FL 33140		4531 SHERIDAN AVE Miami Beach, FL 33140						
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address						
					<u> </u>	II BANK (NAK KODU KUL KUL ALBEL E.		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07142008	Chg-P	CR2E034 (12/06)	
City & State		City & State			4. FEI Number 26-05	80332		oplied For
Zip	Country Zip		Country	,	5. Certificate of Status Desired S8.75 Additional Fee Required		ditional	
	6. Name and Address of Current	Registered Agent			7. Name and A	Address of New R		
FILINGS (N.O.		Name					
FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE, FL. 33311-4132			Street	Street Address (P.O. Box Number is Not Acceptable)				
						<u> </u>		
			City				FL Zip Cod	
8. The above the obligat	named entity submits this statement for tions of registered agent.	or the purpose of changing its r	egistered office	or register	ed agent, or both	, in the State of Flo	orida. I am familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent sign	ature required	when reinstating)		DATE	
	LE NOW!!! FEE IS \$150.00 ue by September 12, 2008	9. Election Campaiç Trust Fund Contri		\$5. Add	00 May Be ed to Fees		with s. 607.193(2)(b), not receive the prior r	
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECTOR	S IN 11
TITLE NAME	D HALLEY-WRIGHT, ANDREW	☐ Delete	TITLE				☐ Change	Addition
STREET ADDRESS	4531 SHERIDAN AVE		NAME STREET ADDRESS					
CITY-ST-ZIP	MIAMI BEACH, FL 33140		CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE				☐ Change	Addition
NAME STREET ADDRESS	HALLEY-WRIGHT, ANDREA 4531 SHERIDAN AVE		NAME STREET ADDRESS					
CITY-ST-ZIP	MIAMI BEACH, FL 33140		CITY-ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE	<u> </u>			Change	Addition
NAME STREET ADDRESS			NAME					
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE	<u> </u>			Change	☐ Addition
NAME			NAME				- -	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS	1				
			CITY-ST-ZIP	1				

Indicated on this report or supplemental (sport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an office or director of the corporation or the receiver or trus fee 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:

/ (V) M

ANDREW HALLEY-WRIGHT

7/18/2008

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Daytime Ptx