• FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 97 SEP -8 PM 1:25 1997 DIVISION OF CORPORATIONS DOCUMENT # 19300000 365 8 SECRETARY OF STATE TALLAHASSEE, FLORIDA On your Mark Design & Publishing, Inc. Principal Place of Business 2544 Robert Trent Jones Dr. # 827 Both Orlando, FL 32835 3. Date Incorporated or Qualified 3a. Date of Last Report Jan. 1993 1996 2. Principal Place of Business
21 2544 Robert Trent Jones D. F 2a. Mailing Address Applied For 59-3164857 26 2544 Robert Trent dones Dr. Not Applicable \$8.75 Additional 5. Certificate of Status Desired # 827 City & State #827 Fee Required 6. Election Campaign Financing \$5.00 May Be Orlando, FL 28 Orlando Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, USA Yes Po Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Lynda L. Rago-Medey (Same) Street Address (P.O. Box Number is Not Acceptable) City Zip Code F 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607 0505, Florida Statutes Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition 1111116 TITLE ynde L. Rago-Medey 1.2 NAME NAME STREET ADDRESS 1.3 STREET ADDRESS 700002289607--1.4 CITY - ST - ZIP -09/10/97--01091--002 CITY+ST-ZIP DELETE TITLE 2.1 TITLE ****165.00 U\$\$\$\$18**5**.000 NAME 2.2 NAME **23 STREET ADDRESS** STREET ADDRESS 2 4 C(TY+ST-ZIP CITY - ST - ZIP Addition DELETE 3.1 THE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. C(1Y - ST - ZIP City - ST- ZiP DELETE Change Addition 4 1 111LE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP DELFTE Addition 6.1.1111.15 TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 14. To hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

8/13/97 (467) 521-8894

To: Sean Toner From: Lynda Medey On Your Mark Designa Publishing

Enclosed is my check for 165.

As you will recall from our recent phone conversation, the state office somethow mis-filed my composite documents and I therefore did not receive a notice on the composite annual report. Because I was not at finalt, I am following your streeting to send the Standard fee without the late penalty. Troukeyon.

lynde Medley