## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000006290 (9)

CUSTOM PUBLISHING & MARKETING GROUP, INC.

Principal Place of Business Mailing Address

**FILED** Jan 21 1998 8:00am Secretary of State



6037 WINDING LAKE DR. P.O. BOX 1150 JUPITER FL 33458 JUPITER FL 334			150				
	74145	DOT 11 E11 1 E 00400 1100			DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified		
- B7					01/22/1993	<del></del>	
22. Principal Place of Business 22. Mailing Address 21/095 Jupiter Park Dr. 26/095 Jupiter			L . K	2 1	4. FEI Number		pplied For
Suite Apt	#. etc.	-, 26 /095 Uupi ] Suite Apt. #, etc.	Ter L	arK	Dr. 65-0380160		ot Applicable
22 Suite 13 27 Suite 13			3	<del></del>	5. Certificate of Status Desired		Additional equired
City & State  23 Jupiter FL 28 Jupiter			PL		Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the cu		tangible
2413345	25 USA		10	USA			_l No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
DOWNES, RICHARD T. JR				81 Name			
6037 WINDING LAKE DR.			82	82 Street Address (P.O. Box Number is Not Acceptable)			
JUPITER FL 33458			83	<u> </u>			
			84	City		or Zin	Code
					Fl	<b>-</b>   -   ·	
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.							
SIGNATURE		,					
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE: F	Registered Ag	eni signature i	required when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	P	DELETE	1.1 THILE			Change	Addition
NAME	DOWNES, RICHARD T		1.2 NAME				
STREET ADDRESS	6037 WINDING LAKE DR.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	JUPITER FL 33458		1.4 CITY - S	ST - ZIP			
TITLE	V	☐ DELETE	2.1 TITLE			Change	Addition
NAME	DOWNES, DEBORAH L		2.2 NAME				
STREET ADDRESS	6037 WINDING LAKE DR.		2.3 STREET	ADDRESS			
CITY-ST-ZIP	JUPITER FL 33458		2.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				-
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-7IP			
TITLE		☐ DELETE	4.1 TITLE	ŀ		∐ Change	Addition
NAME			4. 2 NAME	Ī			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP			<del></del>
TITLE		☐ DELETE	51 TITLE	1		Change	Addition
NAME			52 NAME	]			
STREET ADDRESS			5 3 STREET	ADDRESS			
CITY-ST-ZIP			54 CITY-S	ST-ZIP			
TITLE	<del></del>	☐ DELET <b>E</b>	61 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				ļ
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP	:	,	6.4 CITY-S	I - ZIP			

14. I 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 shanged or on an attachment with an address. or on an attachment with an address.