

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/1/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000031887 (1)

1. Corporation Name

FUTON MARKETING SPECIALISTS, INC.

Principal Place of Business

3640 SOUTH WESTSHORE BLVD.
TAMPA FL 33629

Mailing Address

3640 SOUTH WESTSHORE BLVD.
TAMPA FL 33629

FILED
95 AUG -1 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/30/1993** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-3178775** Applied For ☐ Not Applicable ☐

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. This corporation has liability for franchise tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 **4302 W. EL PRADO BLVD**

2a. Mailing Address

26 **4302 W. EL PRADO BLVD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 **TAMPA, FLORIDA**

City & State

28 **TAMPA, FLORIDA**

Zip

24 **33629**

Country

25 **HILLSBOROUGH**

Zip

29 **33629**

Country

30 **HILLSBOROUGH**

9. Name and Address of Current Registered Agent

KRAMER, RUSSELL W
3640 SOUTH WESTSHORE BLVD.
TAMPA FL 33629

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4302 W. EL PRADO BLVD

83

84

City **TAMPA**

FL

85

Zip Code

33629

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]

(NOTE: Registered Agent signature required when registering)

DATE **7/28/95**

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **KRAMER, RUSSELL W**
STREET ADDRESS **201 WEST LAUREL STREET STE. 902**
CITY, ST, ZIP **TAMPA FL 33602**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **4302 W. EL PRADO BLVD**
1.4 CITY, ST, ZIP **TAMPA, FLORIDA 33629**
☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

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CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RUSSELL KRAMER

7/28/95

813-855-6779