Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90104 018 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1. Corporation	MENT # P9300(DMOTIONS, INC.	0044201				
Principal Place of Business Mailing Address						
% JACK R. BLAUNSTEIN 23281 BUTTERFLY PALM COURT BOCA RATON FL 33433		% JACK R. BLAUNSTEIN 23281 BUTTERFLY PALM COU BOCA RATON FL 33433	JRT	DO NOT WRITE IN THIS SPACE		
	•			3. Date Incorporated or Qualifed 06/17/1993		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0416042	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional	
22		27	_ •	5. Certificate of Status Desired	- Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23 ∫ Žip	Country		Country	This corporation owes the current year.		
⊢ '	25	29 30	¬ ·	Personal Property Tax.	X Yes □No	
24	9. Name and Address of Curre			10. Name and Address of New Regist	ered Agent	
BLAUNSTEIN, JACK R 23281 BUTTERFLY PALM COURT BOCA RATON FL 33433			82 Street Addre よろる	82 Street Address (P.O. Box Number is Not Acceptable) PALM COURT		
			94 Cibr		85 Zip Code	
			Bo		FL 3343 <i>9</i>	
11. Pursuant office or ragent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	502 and 607.1508, Florida Statutes, e of Florida. Such change was auth gations of, Section 607.0505, Florid	a Statutes.	oration submits this statement for the purpoon's board of directors. I hereby accept the	se of changing its registered appointment as registered	
SIGNATURE	Spinature, typed or printed name of registered ac	matrix =	JUDITH R agistered Agent signature required	BLAUNSTEIN DA	4//2/99 TE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12	
TITLE	D ·	₩ DELETE	1.1 TITLE		Change Addition	
NAME	BLAUNSTEIN, JACK R		1.2 NAME			
STREET ADDRESS	23281 BUTTERFLY PALM CO	urt	1.3 STREET ADDRESS .			
CITY-ST-ZIP	BOCA RATON FL 33433		1.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	BLAUNSTEIN, JUDITH R		2.2 NAME	·	.)	
STREET ADDRESS	23281 BUTTERFLY PALM CO	URT	2.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433	- · · · · · · · · · · · · · · · · · · ·	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-ZIP	· _		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS		•	4.3 STREET ADDRESS			
CITY-ST-ZIP ·			4.4 CFTY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	• •	☐ Change ☐ Addition	

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 changed, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

☐ Change

Addition