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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P94000001219 (2)**

1. Corporation Name
AUCTION MARKETING, INC.

Principal Place of Business
1319-61ST AVE EAST
BRADENTON FL 34203

Mailing Address
1319-61ST AVE EAST
BRADENTON FL 34203-6954

3. Date Incorporated or Qualified: **01/06/1994**
3a. Date of Last Report: **03/07/1996**

2. Principal Place of Business
21 6136 24th St. E.
Suite, Apt. #, etc.
22
City & State
23 BRADENTON, Fl
Zip 24 34203
Country 25 MANATEE

2a. Mailing Address
26 6136 24th St. E.
Suite, Apt. #, etc.
27
City & State
28 BRADENTON Fl.
Zip 29 34203
Country 30 MANATEE

4. FEI Number: **65-0459234** ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent
DENNIS, DEBORAH A
4141 43RD AVENUE WEST
BRADENTON FL 34205

10. Name and Address of New Registered Agent
81 Name: Deborah A. Dennis
82 Street Address (P.O. Box Number is Not Acceptable): 6545 TARAWA DR.
83
84 City: SARASOTA FL 85 Zip Code: 34234

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: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	LANDIS, J. OMAR	1.2 NAME	
STREET ADDRESS	4141 BAHIA VISTA STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	
TITLE	ST ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LANDIS, HENRIETTE R	2.2 NAME	
STREET ADDRESS	4141 BAHIA VISTA STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	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 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	400002146554
STREET ADDRESS		6.3 STREET ADDRESS	-04/17/97--01049--046
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***165.00

Corp 4/14

14. I do 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: J. Omar Landis PRES J. OMAR LANDIS 04-08-97 (941) 377-1888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)