FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90180 042 ***150.00



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000002761

1. Corporation Name

RADAN MARKETING SERVICES, INC.

Principal Place	of Business	Mailing Address	Mailing Address						
101 S CONGRE	SS AVE	101 S CONGRESS AVE							
SUITE I		SUITE I				DO NOT WRITE IN THIS SPACE			
DELRAY BEACH	I FL 33445	DELRAY BEACH FL 33445 US	DELRAY BEACH FL 33445			3. Date Incorporated or Qualifed			
US US						01/12/1994			
0.0:	(Declarate	2a. Mailing Address				4. FEI Number		Applied For	
			633			65-0462468	Not Applicable		
21 Suite Ant	# _+-	Suite Ant # etc	Suite, Apt. #, etc.			00-0402400	\$8.75 Additional		
Suite, Apt. a	#, etc.					5. Certificate of Status Desired Fee Required			
22 Ciby & State		City & State				6. Election Campaign Financing \$5.00 May Be			
	,				•	Trust Fund Contribution Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country			8. This corporation owes the current year Intangible			
	25		¬ ' ' ' '			Personal Property Tax.	Yes	□No	
24			<u> </u>			10. Name and Address of New Registered	Agent		
9. Name and Address of Current Registered Agent					Name	To. Hallie alla / Laures of Ho			
DANDRIDGE, RICHARD A									
	CARYOTA DR		82	ᅦ.	Street Addre	Address (P.O. Box Number is Not Acceptable)			
	NTON EBAHC FL 33436		83	╀					
ВОП	NION EDANO I E 33430		0.5	'					
			84	1	City	FL	85	Zip Code	
							بللع		
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 ar	n familiar with, and accept the obliga	tions of, Section 607.0505, Florid	a Statute:	S.	e corporation	13 bodie of directions, thoroby acceptance appear		-	
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE:			egistered Agent signature required						
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D	☐ DELETE	1.1 TITLE				Char	nge	
NAME	Dandridge, Richard A		1.2 NAME			- // /7			
STREET ADDRESS	4234 CARYOTA DR	DR 1.		1.3 STREET ADORESS		123 South port Ir			
CITY-ST-ZIP	BOYNTON EBAHC FL		1.4 CITY-	ST-Z	ZIP BG	yndon Beach, FL 3343T			
TITLE	D	☐ DELETE	2.1 TITLE			923 Southport W yndon Beach, FL 3343T 923 Southport Vr gyndon Beach, FL 3343	Char	nge	
NAME	ROTH, RUTH M		2.2 NAME						
STREET ADDRESS	4234 CARYOTA DR		2.3 STREE		DDRESS 19	23 South port Dr			
CITY-ST-ZIP	BOYNTON EBACH FL		2. 4 CITY-		ZIP Be	rindon Beach, FL 3343	7		
TITLE		☐ DELETE	3.1 TITLE			7	Char	nge	
NAME			3.2 NAME		ļ			•	
STREET ADDRESS	,	·	3.3 STREET		DORESS				
1			3.4. CITY- 5						
CITY-ST-ZIP		☐ DELETE	4.1 TITLE				Chai	nge Addition	
		<u> </u>	4.1 MAME				_		
NAME	, 				D00500				
STREET ADDRESS			4.3 STREET		1				
CITY-ST-ZIP		FIDELETE	4.4 CITY-S		ZIP		Chai	nge Addition	
TITLE	-	☐ DELETE	5.1 TITLE		.	•			
NAME (5.2 NAME						
STREET ADDRESS			5.3 STREI						
CITY-ST-ZIP		<u>_</u>	5.4 CITY-ST		ZIP				
TITLE		□ DELETE	6.1 TITLE]		Chai	nge	
NAME			6.2 NAME						
07057 4005500			6.3 STREI	ET A	DDRESS				

6.4 CITY-ST-ZIP

indicated on this annual report or supplied the final indicated on this annual report or supplemental annual officer or director of the corporation of the receiver Block 12 or Block 13 if changed to an attachment SIGNATURE:

14. I hereby certify that the information supplied

STREET ADDRESS

CITY-ST-ZIP · ·

公UIRED

ling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information reports true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an justee amoved on the secure this report as required by Chapter 607, Florida Statutes; and that my name appears in with an judgest with all other like empowered.