2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000003643

Entity Name: C.R.I. MARKETING, INC.

6572 EASTPOINTE PINES

PALM BEACH GARDENS, FL 33418

Address: City-St-Zip: FILED Jul 02, 2009 Secretary of State

| Littly Na | ille. C.K.I. Wi | ARRETING, INC. | | | |
|---|----------------------------|---|---|--|--|
| Current Principal Place of Business: | | | New Principal Place of | New Principal Place of Business: | |
| | TPOINTE PIN ACH GARDEN | | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| | TPOINTE PIN ACH GARDEN | | | | |
| FEI Number | : 06-1130868 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| PALM BEA | TPOINTE PIN ACH GARDEN | IS, FL 33418 US | e purpose of changing its registered | office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | Electro | nic Signature of Registered A | gent | Date | |
| | | 93(2)(b), F.S., the corporation diding Trust Fund Contribution (). | not receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | KATZ, BURTO 6572 EASTPO | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | KATZ, ROBER 9658 WEST 1 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | TS (KATZ, JOANN |) Delete E B | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: BURTON M KATZ PRES 07/02/2009