

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

FILED
Jun 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000024403 (5) 1. Corporation Name Direct Forwarding, Inc.			
Principal Place of Business		Mailing Address	
8309 N.W. 66th St. Miami, FL 33166		8309 N.W. 66th St. Miami, FL 33166	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 03/30/94	
22 City & State	27 City & State	4. FEI Number 65-0477948	
23 Zip	28 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24	25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Cordero, Margarita 8309 N.W. 66th St. Miami, FL 33166		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable) 854 N.W. 87th Ave.	
		83 Apt. 509	
		84 City Miami	
		85 Zip Code FL 33172	
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	D/P/S/T <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cordero, Margarita	1.2 NAME	
STREET ADDRESS	854 N.W. 87th Ave.	1.3 STREET ADDRESS	854 N.W. 87th Ave., Apt. 509
CITY - ST - ZIP	Miami, FL	1.4 CITY - ST - ZIP	Miami, FL 33172
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	
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.			
SIGNATURE: <u>Margarita Cordero</u>		(305) 592-0206	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034 (10/97)



DIRECT FORWARDING INC.

8309 N.W. 66th Street, Miami, Florida 33166
Tel. (305) 592-0206 • Fax (305) 592-3805

JUNE 19, 1998

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

DEAR SIR,

WE ADVISED THAT WE HAVE NOT RECEIVED THE CORPROATION ANNUAL REPORT 1998 IN THE MAIL FROM YOUR OFFICE IN TIME FOR FILING FOR SAME ON OR BEFORE MAY 1, 1998. WE CHECKED FURTHER WITH OUR ACCOUNTANT WHO PREPARED A REPORT SO THAT WE CAN FILE SAME. WE UNDERSTAND THAT AT THIS TIME WE ARE LATE IN THE PROCESS, HOWEVER, WE ASK THAT YOU CHECK OUR PREVIOUS RECORDS OF PAYMENT WHICH WERE ALWAYS ON TIME AND APPRECIATE YOUR ASSISTANCE IN THIS MATTER.

WE ARE ENCLOSING OUR CORPORATION ANNUAL REPORT FOR 1998 TOGETHER WITH OUR CHECK FOR \$150.00 REPRESENTING THE FILING FEES. PLEASE DO NOT HESITATE TO CONTACT OUR OFFICE FOR ANY FURTHER INFORMATION/DETAILS YOU MAY REQUIRE.

THANK YOU FOR YOUR SUPPORT

YOURS TRULY,

DIRECT FORWARDING INC

MARGIE CORDERO