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95 APR 26 PM 1:26

STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000031859 (9)

1. Corporation Name

INVINCIBLE MARKETING GROUP, INC.

Principal Office Address

10931 - 75 STREET
LARGO FL 34647

Mailing Address

10931 - 75 STREET
LARGO FL 34647

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/27/1994

3a. Date of Last Report

4. FEI Number

59-3284839

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

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

2. Principal Office of Business

21

State Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

State Apt. #, etc.

27

City & State

28

Zip

Country

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ENGLANDER, LEONARD S
5959 CENTRAL AVENUE
SUITE 201
ST. PETERSBURG FL 33710**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.08(2) 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

(If the Agent is not the corporation, the registered agent, or the corporation's board of directors, the signature of the registered agent must be provided.)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	D
NAME	ENGLANDER, LEONARD S
STREET ADDRESS	5959 CENTRAL AVENUE, SUITE 201
CITY & STATE	ST. PETERSBURG FL 33710
NAME	
NAME	
STREET ADDRESS	
CITY & STATE	
NAME	
NAME	
STREET ADDRESS	
CITY & STATE	
NAME	
NAME	
STREET ADDRESS	
CITY & STATE	
NAME	
NAME	
STREET ADDRESS	
CITY & STATE	

1. NAME	☐ Change ☐ Addition
1. NAME	
1. STREET ADDRESS	
1. CITY & STATE	
2. NAME	☐ Change ☒ Addition
2. NAME	PRESIDENT
2. STREET ADDRESS	BRIAN A STOVER
2. CITY & STATE	14390 - 90TH AVENUE N
3. NAME	☐ Change ☐ Addition
3. NAME	
3. STREET ADDRESS	
3. CITY & STATE	
4. NAME	☐ Change ☐ Addition
4. NAME	
4. STREET ADDRESS	
4. CITY & STATE	
5. NAME	☐ Change ☐ Addition
5. NAME	
5. STREET ADDRESS	
5. CITY & STATE	
6. NAME	☐ Change ☐ Addition
6. NAME	
6. STREET ADDRESS	
6. CITY & STATE	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and true, and equally for the exemption stated in Section 191.07(3)(b), Florida Statutes. I further certify that the information included 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 registered agent or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an officer list with an address.

SIGNATURE: **x**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/95 (813) 545-1800