SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P94000062741 (1)

## THE VICTORIA MARKETING GROUP INC.

**FILED** Aug 16 1996 8:00 am Secretary of State

	iffill Blais Ba	(4) <b>((()</b> () () () () () () () () () () () () ()	. 68116 61116		Sifter tebr tebr

Principal Place o	of Business	Mailing Addre	ŝŝ			) (dilitat) tid 18tit minte gatti maris a	#FFF ##FF# \$172 TIBET TERM #1991 TIBET
1082 ERIC COURT 14436 TAMBORINE DR KISSIMMEE FL 34744 ORLANDO FL 32837				i			
US	. 411.17					3. Date Incorporated or Qualified 08/25/1994	3a. Date of Last Report 05/31/1995
2. Principal Plac	ce of Business	2a. Mailing Ad 26				4. FEI Number 59-3272271	Applied For Not Applicable \$8.75 Additional
Suite, Apt. #,	etc	Suite, Apt	#, etc			5. Certificate of Status Desired	Fee Required
City & State		City & Stat	e			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z <sub>i</sub> p	30	Country		8. This corporation has liability for Florida Statutes	J Yes No
24	9. Name and Address of Curr					10. Name and Address of New Re	egistered Agent
			<del> </del>	81	Name		<u></u>
	ith, David 136 Tamborine Dr			82	Street Addr	ess (P.O. Box Number is Not Accepta	ble)
OR	LANDO FL 32837			83	·- ·		
•				64	City	oration submits this statement for the jon's board of directors. Thereby a scul	FL 85 Zip Code
SIGNATURE	OFFICERS	agestarcture dapplication	OFFICE RES	13.		and the renstating)  ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12 Charge Addition
TITLE NAME	P MOTH, MARION	L	DECETE	1.3 THEF 1.2 NAME 1.3 STREET	(	dyssey Leach	u /
STREET ADDRESS	1082 ERIC COURT		į	14 CITY-5	1 '	Kissimmee Fl. 3474	
CITY-ST-ZIP TITLE	KISSIMMEE FL		DELETE	21 TITLE			Change Addition
NAME		<del></del>		22 NAME	1		
STREET ADORESS				23STREE			
-			L SOLETE	2 4 CITY	S1 - ZIP		
CITY-ST-ZIP	F			2 1 7111			Change Addition
TITLE			DEFELE	31 TITLE			Charge Addition
			] Dritt	3.2 NAME			Chacge Add-tion
TITLE NAME STREET ADORESS			Dritte	32 NAME 33 STREF	T ADDRESS		
NAME STREET ADDRESS CITY-ST-ZIP			DELETE	3.2 NAME	T ADDRESS		
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE				32 NAME 33 STREE	T ADDRESS S1-7IP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME				3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAME	T ADDRESS S1-7IP		
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS			DELETE	3.2 NAME 3.3 STREE 3.4 CITY 4.1 TITLE 4.2 NAMI 4.3 STREE 4.4 CITY	T ADDRESS S1-7IP		Change Addition
TITLE NAME STREET ADORESS CITY-SI-ZIP TITLE NAME				3.2 NAME 3.3 STREF 3.4 CITY: 4.1 TITLE 4.2 NAMI 4.3 STREF 4.4 CITY: 5.1 TITLE	T ADDRESS S1-7IP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	3.2 NAME 3.3 STREF 3.4 CITY 4.1 TITLE 4.2 NAMI 4.3 STREF 4.4 CITY 5.1 TITLE 5.2 NAMI	T ADDRESS S1-7IP		Chaage Addation
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			DELETE	3 2 NAME 3 3 STREF 3 4 CITY 4 1 TITLE 4 2 NAMI 4 3 STREF 4 4 CITY 5 1 TITLE 5 2 NAMI 5 3 STREF	T ADDRESS S1-7IP  I ADDRESS ST-ZIP  ET ADDRESS		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			DELETE	3 2 NAME 3 3 STREF 3 4 CITY 4 1 TITLE 4. 2 NAMI 4 3 STHEF 4 4 CIFY 5 1 TITLE 5 2 NAMI 5 3 STHE 5 4 CIFY	T ADDRESS S1-7IP  I ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	100010	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			DELETE	3 2 NAME 3 3 STREF 3 4 CITY 4 1 TITLE 4. 2 NAMI 4 3 STREF 5 1 TITLE 5 2 NAMI 5 3 STRE 5 4 CITY 6 1 TITLE	T ADDRESS S1-7IP	1000019	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP			DELETE	32 NAME 33 STREF 34 CITY 41 TITLE 4.2 NAME 43 STREF 51 TITLE 52 NAME 53 STREF 54 CITY 61 TITLE 62 NAME	T ADDRESS S1-7IP  H ADDRESS ST-ZIP  ET ADDRESS -S1-ZIP	1000019 -08/16/960 ***275.00	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			DELETE  DELETE	3 2 NAME 3 3 STREF 3 4 CITY 4 1 TITLE 4 2 NAME 4 3 STREE 5 1 TITLE 5 2 NAME 5 3 STREE 6 1 TITLE 6 2 NAME 6 3 STREE 6 3 STREE 6 3 STREE 6 3 STREE 6 3 STREE 6 3 STREE 6 3 STREE	T ADDRESS S1-7IP  EI ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS	100019 -08/16/960 ***375.00  ualify for the exemption stated in Section and accurate and that my signature	Change Addition    Change   Addition   Change   Addition

Too nemay coming man the information sopplied with this annual report or supplemental annual report is true and accurate and that my signature shall have the signature certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the signature certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617 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 617 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 617 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 617 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 617 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 617 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 617 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 617 made under oath, that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 617 made under oath and the receiver of the corporation of the

SIGNATURE: ...