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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400070810 (4) MARKETING AMERICAS GROUP, INC.

	THE AMERICAS GIVE	<i>7</i> 1 ; 11(0)							
Principal Place of Business		Mailing Address	Mailing Address			T I IOSPISON ISO NONIN OLDIN DONN DENIS DONIN		ilei ibial ile	H 0011 1001
2121 PONCE DE LEON STE 740		2121 PONCE DE LE STE 740	2121 PONCE DE LEON STE 740						
CORAL GABLE	8 FL 33134		CORAL GABLES FL 33134-5222						
US O Colonia de la Colonia de	Discount D	US				3. Date Incorporated or Qualified 09/23/1994		e of Last I 0/1996	Report
2. Principal P	Place of Business	2a. Mailing Addres	2a. Mailing Address			4, FEI Number •65-0522954			oplied For Iol Applicable
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.						Additional
22		27				5. Certificate of Status Desired			Required
City & Stat	le	City & State				6. Election Campaign Financing			May Be
Zip Country			Zip Country			Trust Fund Contribution			to Fees
24	25 29		30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	g. Name and Address of					10. Name and Address of New Reg			
	MBIELA, ROYMI V			81	Name				
2610 SW 5 AVE				62	Street Add	ress (P.O. Box Number is Not Acceptable)			
MRA	MI FL 33129			В3	·····		· · · · · · · · · · · · · · · · · · ·		
			į						
				84			FL		Code
11. Pursuant	to the provisions of Sections 6	07.0502 and 607.1508, Florida	Stattyes, the ab	ove	e-named corp	poration submits this statement for the pution's board of directors. I hereby accept	irpose of c	hanging i	ils registered
agent. I a	imperniliar with, by accept the	obligatings of Society 607.05	5 Iorida Stati	ales	тив согрога 5.	norra board of directors. Thereby accept		niment as	; registereo
SIGNATURE	Signature, typeg or prijlykd name of regis	MANAGE	1			- 7	1211	1'/	
12.		RS AND DIRECTORS	13.	Age	ut signature redui	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND I	DIRECTO	DC IN 12
TITLE	PD DELETE			3.1 TITLE		ADDITION OF TANGED TO CITTOE		Change	Addition
NAME	MEMBIELA, ROYMI V		1.2 NA	1.2 NAME 1.3 STREET ADDRESS		•			
STREET ADDRESS	2610 SW 5 AVE		1.3 ST						
CITY-ST-ZIP	MIAMI FL 33129	□ DELE	1.4 CIT	Y - \$1	T-ZIP				
TITLE	L		IE 2.1 TIT	2.1 TITLE			Ĺ	Change	Addition
NAME			2 2 NA						
STREET ADDRESS			1		ADDRESS		·		
CITY-ST-ZIP TITLE		DELE	2. 4 GI		I - ZIP			Change	Addition
NAME			3.2 NAI				L	_ Change	LT MORROW
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			3.4. CIT						
TITLE		☐ DELET						Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STF	REE1 /	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y - S1	- 7iP				
TITLE		DELET	E 5.1 TITE	E		·	L	Change	Addition
NAME			5.2 NA)	ME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		Detroi	54011		- ZIP			។	
TITLE		DELET					L	Change	☐ Addition
NAME STREET ADDRESS			6 2 NAM		1555455				
					ADDRESS				
CITY-ST-ZIP			6.4 CIT	Y - ST	- ZIP				

I do hereby certify that the information supplied with this filling 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 copy ation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my riame appears in Block 12 or Block 13 if changed, or on arrestactment with an articless.