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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000034992 1. Corporation Name

DENOVO MARKETING GROUP, INC.

Principal	Place	of	Bus	ines

Mailing Address

## FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90018 041 \*\*\*150.00



Principal Place	Of BUSINESS	William 7 taci caa									
THOU MENDINGS OF		1430 ALABAMA DR WINTER PARK FL 32789	-* ·					<b></b>			
						DO NOT W		IIS SPACE			
						ate Incorporated or Qualife 5/04/1995	d			1	
2 Principal Pla	ace of Business	2a. Mailing,Address				El Number			Applie	ed For	
1343	ALBERTA PRIVE	26 1343 HLBE	RTA	DRIV	E 5	9-3313083			Not A	pplicable	
Suite, Apt.	<del></del>	Suite, Apt. #, etc.				artificate of Status Desired		• -	<b>75</b> Add		
22		27			5. Co	ertificate of Status Desired	<u> </u>	Fe	e Requ	ired	
	City & State Park CIA State Day IC			FLA		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees					
Zip 32	789 Country	Zip 32789 Country				8. This corporation owes the current year Intangible Personal Property Tax.					
-	9. Name and Address of Current	Registered Agent			10. N	ame and Address of Nev	Register	ed Agent			
			81	Name							
	CHNER, TONYA L		82	Street A	Address (P.O.	Box Number is Not Acce	otable)	<del>-</del>			
	ALABAMA DR		02	82 Street Address (P.O. Box Number is Not Acceptable)							
WINT	ER PARK FL 32789		83							ĺ	
			84	City				85	Zip Co	de	
			ł				F	·L			
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes,	the above	e-named c	corporation s	ubmits this statement for t	he purpose	of changin	ig its re as regis	gistered tered	
) office or re agent. I ar	egistered agent, or both, in the State of n familiar with, and accept the obligation	ns of, Section 607.0505, Florida	Statutes	tue corboi	ialion s boar	d of directors. Thereby do	opi alio api	p-0,1111107111		Ì	
SIGNATURE										}	
	Signature, typed or printed name of registered agent a			nt signature rec	quired when rains		DATE	AND DIDE	CTOR	2 IN 12	
<u> 12</u>	OFFICERS AND		13.	<del></del>	AD	DITIONS/CHANGES TO	JFFICERS	Cha		Addition	
TITLE	D .	☐ DELETE	1.1 TITLE		00504	HIER TONE	14-1				
NAME )	DASCHNER, TONYA L		1.2 NAME	·}-	DUSCO	A PART TO A				. }	
STREET ADDRESS	1430 ALABAMA DR			T ADDRESS	1343	HUER TONI ALBERTA D ITER PARK	EIVE	£.5	-70	9	
CITY-ST-ZIP	WINTER PARK FL 32789	CI ACUETT	1.4 CITY-S	T-ZIP	<u> </u>	THE PARK	<u> </u>	Cha	tode	Addition	
TITLE	D TOURS TANABA I	☐ DELETÉ	2.1 TITLE								
NAME {	TRAVISS, TAMARA J		2.2 NAME							(	
STREET ADDRESS	1991 MOHICAN TR			TADORESS						İ	
CITY-ST-ZIP	MAITLAND FL 32751	Floriere	2.4 CITY-5	ST-ZIP				Cha	inge	Addition	
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NAME			3.2 NAME								
STREET ADDRESS				T ADORESS							
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NAME		:	4. 2 NAME							ļ	
STREET ADDRESS				T ADDRESS							
CITY-ST-ZIP	<u></u>	DELETE	4.4 CITY- S 5.1 TITLE	II-ZIP				☐ Cha	ange	Addition	
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NAME				T ADDRESS						\	
STREET ADDRESS			5.4 CITY-S							j	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		<del></del>	<del>.</del>		☐ Cha	ange	Addition	
TITLE			6.2 NAME						-	_	
NAME				T ADDRESS	İ						
STREET ADDRESS				- 1						}	
CITY-ST-ZIP			6.4 CITY-5	11-21							

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 mistee 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, with all other like empowered.

SIGNATURE: