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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P95000043127

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 10, 1999 8:00 am Secretary of State

05-10-1999 90184 014 ***150.00

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V CUM N	MARKETING, INC.								
Data di al Dia a	- A D	Mailing Address		-		j j ob iljobi (48 1819) billi bovil od)	li galti balil ol		#W
Principal Place		, and the second							
101425 OVERSE #829	AS HWY	101425 OVERSEAS HWY #829							
KEY LARGO FL	33037	KEY LARGO FL 33037				DO NOT WRIT	E IN THIS	SPACE	
US		US			3	Date Incorporated or Qualifed			
						06/06/1995			
2. Principal Pl	ace of Business	2a. Mailing Address	-		4	I. FEI Number			Applied For
21		26				<u>65-0585067</u>			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5	S. Certifcate of Status Desired			Additional Required
22		27							
City & State	е	City & State			6	6. Election Campaign Financing			O May Be
23		28	Countr			Trust Fund Contribution			5 to rees
Zip	Country	Zip	Country	,	8	 This corporation owes the curre Personal Property Tax. 	ent year inta	ingible ∐Yes	Mo
24	25		30). Name and Address of New R	egistered A		
	9. Name and Address of Curre	nt Registered Agent	81	Name		. Halle Bild Harden C. Heart			
INGE	NITO, GREGORY F.		L.						
	25 OVERSEAS HWY		82	Street Ad	ddress (P.O. Box Number is Not Accepta	ble)		
#829			83	 					
	LARGO FL 33037								
			84	City			FL	85 Zi	p Code
office or re agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was a ations of, Section 607.0505, Flor	uthorized by rida Statute	the corpora s.	ation's C	ooard of directors. I hereby accep	t the appoin	tment as	registered
	Signature, typed or printed name of registered ag		13.	nt signature requ	uired when	ADDITIONS/CHANGES TO OF		D DIREC	TORS IN 12
TITLE	PSTD	ND DIRECTORS	1.1 TITLE			ADDITIONS/STIMES TO ST	102/10/11/1	Chang	
	INGENITO, GREGORY F	C Destric	1.2 NAME						_
NAME	101425 OVERSEAS HWY., #8	20		T ADDRESS					
STREET ADDRESS	KEY LARGO FL	2 3	1.4 CITY-						
CITY-ST-ZIP TITLE	NET DANGO FL	DELETE	2.1 TITLE	91-ZIF				Chang	je 🗌 Addition
			2.2 NAME						ł
NAME				T ADDRESS					Í
STREET ADDRESS			2.4 CITY-						
CITY-ST-ZIP		☐ DELETE	3,1 TITLE	31-211				Chang	e Addition
NAME			3.2 NAME	1					ł
STREET ADDRESS			1	T ADDRESS					
CITY-ST-ZIP			3.4, CITY-	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					☐ Chang	ge 🔲 Addition
NAME			4. 2 NAME	:					
STREET ADDRESS			4.3 STRE	ET ADDRESS					
CITY-ST-ZIP			4.4 CITY-	ST-ZIP					
TITLE	·	☐ DELETE	5.1 TITLE					Chang	ge 🗌 Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STRE	ET ADDRESS					ļ
CITY-ST-ZIP			5.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE					Chang	ge
NAME			6.2 NAME						
STREET ADDRESS			6.3 STRE	ET ADDRESS					J

6.4 CITY-ST-ZIP 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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)

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