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
1996

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

DOCUMENT # **P95000044154 (9)**

1. Corporation Name
MARKETING DEPOT, INC.

Principal Place of Business	Mailing Address
855 SOUTH FEDERAL HIGHWAY SUITE 200 BOCA RATON FL 33432	855 SOUTH FEDERAL HIGHWAY SUITE 200 BOCA RATON FL 33432

3. Date Incorporated or Qualified: 06/07/1995
3a. Date of Last Report:
4. FEI Number: 65-0590699 ☑ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$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 Place of Business	2a. Mailing Address
21 4047 Okeechobee Blvd	26 4047 Okeechobee Blvd
22 Suite 306	27 Suite 306
23 West Palm Beach	28 West Palm Beach
24 Zip 33409 / 25 Country US	29 Zip 33409 / 30 Country US

9. Name and Address of Current Registered Agent

DAVIS, RICHARD S
C/O FOLEY & LARDNER
777 S. FLAGLER DRIVE, SUITE 200
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name: Lee Pryor Marketing Depot
82 Street Address (P.O. Box Number is Not Acceptable): 4047 Okeechobee Blvd., Ste. 306
83
84 City: West Palm Beach FL 85 Zip Code: 33409

11. Pursuant to the provisions of Section 607.0502 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: W. Lee Pryor
Signature of the president or vice president of the registered agent and title, if applicable (DATE: Registered Agent Signature required when filing) DATE

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	W. Lee Pryor President Marketing Depot 4040 Okeechobee Blvd., Ste. 306 West Palm Bch, FL. 33409	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Robert Hall, V.P. Same as above	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: W. Lee Pryor 7/11/96 561-615-0047
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #