

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

FILED
Jan 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000046181 (0)

1. Corporation Name

MARKETING DIRECT ASSOCIATES, INC.



Principal Place of Business

Mailing Address

13899 BISCAYNE BLVD
136
NORTH MIAMI FL 33181
US

13899 BISCAYNE BLVD
136
NORTH MIAMI FL 33181
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 555 S.W. 12th Ave

22 Suite Apt. #, etc.

22 #108

23 City & State

23 Pompano Bch., FL

24 Zip

24 33069

25 Country

25 USA

2a. Mailing Address

26 555 S.W. 12th Ave

27 Suite Apt. #, etc.

27 #108

28 City & State

28 Pompano Bch., FL

29 Zip

29 33069

30 Country

30 USA

3. Date Incorporated or Qualified

06/08/1995

4. FEI Number

65-0587967

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

TIGHE, THOMAS J
TUCKER & TIGHE, P.A.
800 EAST BROWARD BLVD, SUITE 505
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D THEODORE, MARK

STREET ADDRESS 1801 A SOUTH POWERLINE ROAD, SUITE 026

CITY-ST-ZIP POMPAHO BEACH FL 33069

TITLE ☐ DELETE

NAME 555 S.W. 12th Ave suite 108

STREET ADDRESS Pompano Bch., FL 33069

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

SIGNATURE:

SIGNATURE AND ADDRESS

CR2E034 (10/97)