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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000059574 (0)

MARKETING PRESENTATIONS INCORPORATED

Principal Place of Business Mailing Address

6711 NEWPORT LAKE CIRCLE

BOCA RATON FL 33496-3004

BOCA RATON FL 33496-3004

FILED Feb 27 1998 8:00am Secretary of State



BOCA RATON FL 33496-3004		BOCA RATON FL 33496-3004		DO NOT WRITE IN TH	HIS SPACE		
					3. Date Incorporated or Qualified 08/02/1995		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied	For
21		26		65-0611266	Not Appl	licable	
Suite, Apt. #, etc.		Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition Fee Required		
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May E Added to Fee		
Zip	Gountry	Zip Country			8. This corporation owes or has paid the	current year Intangibl	le
24	25	29	30		Personal Property Tax due June 30.	Yes No	
	g, Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent	
	abrow, Penn B		1'	Name			1
	' BRICKELL AVE.		ħ	Street	Address (P.O. Box Number is Not Acceptable)		
900	SUN BANK BLDG.		L		, , , , , , , , , , , , , , , , , , , ,		
MIA	MI FL 33131] 1	33			
			- h	4 City		85 Zip Code	
				'	F	•L	
11. Pursuant to office or reagont. I ar	o the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the oblight	and 607.1508, Florida Statu f Florida. Such change was ions of, Section 607.0505, F	tes, the ab authorized lorida Statu	ove-named by the corp les.	corporation submits this statement for the purpos poration's board of directors. I hereby accept the	e of changing its regis appointment as registe	stered lered
SIGNATURE	Signature, typed or printed name of registered agent	NO skieskyje trouk tou	TE Flagistered	Agent signature	required when reinstering) DAT	E]
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS		
TATLE	PO	DELETE	1.1 THE	F		Change	Addition
NAME	BRESLOW, MICHAEL G		1.2 NAM	1E			
STREET ADDRESS	6711 NEWPORT LAKE CIRCLE		1.3 STR	EET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33496-3004		1.4 CIT	'-ST-ZIP			
TITLE	STD	DELETE	2 1 TITU	F		Change D	Addition
NAME	BRESLOW, JUDITH		2 2 NA	1E	•		
STREET ADDRESS	6711 NEWPORT LAKE CIRCLE		2.3 STR	EET ADORESS	%e ⁻		
CITY - ST - ZIP	BOCA RATON FL 33496-3004			Y-ST-ZIP			
TIFLE		☐ DELETE	3 1 TITL			Change .	Addition
NAME			3.2 NA				
STREET ADDRESS				EET ADDRESS	'		
CITY-ST-ZIP		T recent		Y-ST-ZIP		Change 1	Addition
TITLE		☐ DELETE	4.1 TITL			Change C.	Addition
NAME			4. 2 NA				
STREET ADDRESS				FET ADDRESS			
CITY-ST-ZIP		DELETE		-ST-ZIP		Change	Addition
TITLE		(Dettie	5.1 TITU			Clarife C.	AUUIIIUII
NAME			5.2 NAM				
STREET ADDRESS			1	FET ADDRESS			
CiTY-S1-ZiP		DELETE		- ST- ZIP		Change /	Addition
TITLE		[_] ՄՀԱ։Ա	6.1 TITU			☐ Cuaube ☐ A	Addition
NAME			6.2 NAM				
STREET ADDRESS				EE1 ADDRESS			
CITY-ST-ZIP			6.4 CIT	/-ST-ZIP	1		

4. Thereby 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 an attractional with an address.

CICNATURE.

2/18/54

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