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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500063888 (8)

FLORIDA DIVERSIFIED MARKETING, INC.

| Principal | Plane of Rusine | | Mail | ing Address | | | | | | | | | | |
|--|--|---|----------------|--|---|--|---------------------|-------------------------|------------------------|--------------|------------|-----------------------|--------------------------|------------------------------|
| Principal Place of Business 4332 W. WATERS AVE. SUITE 102 TAMPA FL 33614 | | | | 4332 W. WATERS AVE. SUITE 102 TAMPA FL 33614-8117 | | | | | | | | | | |
| | | | | | | | | | Incorporated 7/1995 | d or Qualifi | | Date of L 05/01/19 | | port |
| 2. Princip | ia! Place of Bus | siness | 28. 1 | Mailing Address | | | | 4. FEI N | | | | | | plied For |
| 21 | | | 26 | | | | | 59~ | 3342427 | , | | | \rightarrow - | Applicable |
| n | Apt. #, etc | | h | Suite, Apt. #, etc. | | | | 5. Certif | icate of Stat | us Desired | . 🗆 | | . / D A ee Red | dditional |
| 22 City 8 | State | | 27 | Dity & State | | | | 6 Flecti | on Campaig | n Financio | | | | May Be |
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| 24 | | 25 | 29 | | 30 | | | | a Statutes | | Yes | | | |
| | 9. Nam | e and Address of Curr | ent Registe | red Agent | | | | 10. Name | and Addre | ess of Nev | v Registe | red Agent | | |
| | KLINE, J. DAV | | | | | 81 Na | amey po | PEV F | LAL | I)WE | LL | JR | | |
| | | HATTAN AVE., APT. 2 | 223 | | | 82 Str | reey Ayloke | es (P.O/Bo | x Nymbari | Not Aco | g(able) | <u></u> | 1/ | 20 |
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| | | | | | | 84 Cit | Tam | 104 | | | | B5 85 | 305 | 9 ^{de} [] |
| 11. Pursi | uant to the prov | visions of Sections 607.0 | 502 and 607 | 7.1508, Florida Stati | utes, the a | bove-nar | med corp | oration subr | nits this stat | ement for t | the purpo | se of chang | ging its | registered |
| office | or registered a | risions of Sections 607.05 a jent, or both, in the Sta with, and accept the bot | ate of Florida | Such change was sedion 607.0505. | s authorize Florida Sta | d by the tutes. | corporati | ion's board (| of directors. | 1 hereby a | ccept the | appointme | ent as i | registered |
| SIGNATU | | 1/1/1/1/ | | | | | _ | | | | 4- | 1-9 | | |
| | | | ~~~ | | $V \cup \mathcal{M} U$ | | | | | | | , , | | |
| | Signature typ | ed or printed name of registered a | | applicable (NC | | d Agent Big | nature require | ed when reinstati | - | | | TE | | |
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SIGNATURE:

14. I do 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 chapted, or on an integrity and directs.

FILED

Apr 28 1997 8:00am

Secretary of State