SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

215 EASTRIDGE DR

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Aug 04 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600003211 (5)

## E.L.M. MARKETING INC.

Principal Place of Business

215 EASTRIDGE DR

NAME

**STREET ADDRESS** 

CITY-ST-ZiP

EUSTIS FL 32726 EUSTIS FL 32726 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/08/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3353775 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. \_\_\_ Yos 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 OLSON, ERIC A Name 215 EASTRIDGE DR 82 Street Address (P.O. Box Number is Not Acceptable) **EUSTIS FL 32726** 83 84 City 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 so sheab'r (NOTE: Registered Agent signature ed when reinstellen) CR2E034 (5/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE .1 TITLE DELETE Change Addition OLSON, ERIC A NAME 1.2 NAME 215 E RIVER DR 1.3 STREET ADDRESS STREET ADDRESS **EUSTIS FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DETELE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.17111.6 \_\_\_ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE opopissos 1 (4) DELETE 51TALE NAME 5.2 NAME **--08/**05/98---01071---0**4**8 STREET ADDRESS 53 STREET ADDRESS \*\*\*150.00 CITY-ST-ZIP 5.4 CITY ST ZIP 6.1 TITLE TITLE DELETE

6.2 NAME

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 suppliemental 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.

63 STREET ADDRESS

64 CITY-ST-ZIP

Divion Of Corporations Annual Reports Filings P O BOX 1500 Tallahassee FL 32302-1500 7-25-98

RE: Annual Report E.L.M. Marketing Inc

Please be informed that this is the First Annual report I have recieved with this in mind. Hopefully you will accept the norman fee of \$150.00 Thank you for your early reply.

E.L. M. Marketing Inc

Eni Om