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 # P96000011160 (4)

CAPITAL MARKETING ASSOCIATES, INC.

Principal Place of Business

Mailing Address

255 8. ORANGE AVE. STE. 1201 P.O. BOX 3826 ORLANDO FL 328

FILED May 04 1998 8:00am Secretary of State



ORLANDO FL 32801	OIDIN	CHANGO FE SZOLE			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
2. Principal Place of Business	AYE 2a. Mail	ing Address		K	02/01/1996 4. FEI Number		pplied For
21 313 W. FAIRE	SANKS 26 131	ing Address 3 W.FA	PIKBA.	aks ^{tive}	59-3359745		ot Applicable
Suite, Apt. #, etc.	Suite	e, Apt. #, etc.					Additional
22	27				6. Certificate of Status Desired	Fee R	equired
City & State 23 WINTER PAR		& State	PARK	C.	6. Election Campaign Financing		May Be
	untry Zip	INTER 1	Countr		Trust Fund Contribution		to Fees
¬ 12. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	29 3a789 30 30 30 30 30 30 30 30 30 30 30 30 30				8. This corporation owes or has paid the currept year Intangible Personal Property Tax due June 30. ✓ Yes ✓ No		
	Idress of Current Registered	Agent	1301		10. Name and Address of New Regis		
RUSSO, DAVID A			81	Name			
255 S. ORANGE AVENUE STE. 1201				82 Street Address (P.O. Box Number is Not Acceptable)			
				<u> </u> Se	LE 2		
ORLANDO FL 32801			83	3			
			84	City		- 85 Zip	Code
						<u> </u>	
 Pursuant to the provisions of S office or registered agent, or I agent. I am familiar with, and 	both, in the State of Etorida, Su	uch change was a	authorized b	ov the corpora	rporation submits this statement for the purp ation's board of directors. I hereby accept the	cose of changing in the appointment as	ts registered registered
SIGNATURE Signature, typed or printed	nane of registered agent and tilk of appli	cable (NOI)	L: Registered Ac	nent signature regu	uired when reinslating)	DATE	
12.	OFFICERS AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE ST		DELETE	1.1 TITLE			Change	Addition
NAME LANG, BETH A		EE 2	1.2 NAME				
	L ATE, SIL. IZUI	cc a	1.3 STREE	1 ADDRESS			
CITY-ST-ZIP GRLANDO FL 8	/ 2801 -	Decision	1.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	2.1 1111,E			Change	☐ Addition
NAME STREET ADORESS			2.2 NAME				
CITY-ST-ZIP			2.4 CITY-	T ADDRESS	•		
TITLE		DELETE	3.1 TITLE	31.71		☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST - ZIP			
TITLE		DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY-	ST-ZIP		T 0:	T raam.
TITLE		pricit	5.1 TITLE			∟ Change	☐ Addition
•			5.2 NAME	TANNECCE			
STREET ADDRESS CITY-ST-ZIP			5.4 CITY-	T ADDRESS			
TITLE		DELETE	6.1 TITLE	31-411.		☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			6.4 CITY				
14. Thereby certify that the informa-	ation supplied with this filing of	loes not qualify fo	or the exemi	otion stated in	n Section 119.07(3)(i), Florida Statutes. I furture shall have the same legal effect as if ma	ther certify that the	information
officer or director of the corpor	ration or the receiver or trustoe	e empowered to e	execute this	report as rec	cure shan have the same legal effect as it ma puired by Chapter 607, Florida Statutes; and	that my name ap	pears in
Block 12 or Block 13 if change	50, or on an anachment with a	ni address.			, -		
	115. 11/	,			1/1/00 11	- 1 -	