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 # P96000024178 (1)

SIMPLE SUCCESS MARKETING, INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Plac	e or Business	Mailing Address			
1487 PENINS		1467 PENINSULA LANE			
PAUM CITY F	L 34990	PALM CITY FL 34990		DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	
				03/19/1996	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2/6U	GOOD PARM GE &	26 2646 SW	MAPP ROAL	65-0654001	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22 #=	103	27 # 10	3	5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23 PAL	N CITY FC	28 PAUL CIT	V. F. C.	Trust Fund Contribution	Added to Fees
Zip	Country	79.16.4	dountry	8. This corporation owes or has paid the o	current year Intangible
349		29 54990 3	MARTIN	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent '
	GGETT, JOYCE A		81 Name		
	67 SW PENINSULA LANE		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
PALM CITY FL 34990					
			63		
			84 City		85 Zip Code
			[0.1 J	F	L 55 2.15 0000
office or r	registered agent, or both, in the State of small registered agent, or both, in the State of small register with, and accept the obligations.	f Florida. Such change was aut	horized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	opointment as registered
SIGNATURE	Signature, typied or printed name of registered agent	and title diapolicable (NOTE: F	Registered Agent signature requi	ired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	BAGGETT, JOYCE A		1.2 NAME		
STREET ADDRESS	1467 SW PENINSULA LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL		1.4 City - ST - ZIP		
TITLE		☐ DELETE	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	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 THILE		Change Addition
NAME .	· ·		4. 2 NAME		- —
STREET ADDRESS		***	4.3 STREET ADDRESS		
C/TY-ST-ZIP	•		4.4 CITY- ST- ZIP		
TITLE		DFLETE	51 THILE		Change Addition
NAME		i	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		•	5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	7-10-11-11-11-11-11-11-11-11-11-11-11-11-	Change Addition
NAME			6.2 NAME		-
STREET ADDRESS			6.3 STREET ADDRESS		
CHY-ST-ZIP			6.4 CITY - ST - ZIP		
	L certify that the information supplied with	this filing does not qualify for t		Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicatéd officer or	on this annual report or supplemental director of the perpenation or the receiver	annual report is true and accura rer or trustee empowered to exc	ate and that my signat∪	re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and tha	under oath; that I am an
Block 12	or Block 13 if rhanged, or on all allact	ment with an address		. 6	701