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

CORPORATION ANNUAL REPORT

1. Corporation Name



Secretary of State DIVISION OF CORPORATIONS

Mar 11, 1999 8:00 am Secretary of State **PROFIT** FLORIDA DEPARTMENT OF STATE Katherine Harris

03-11-1999 90042 035 ***150.00

FILED



PROMO	DEPOT, INC.						
Principal Place of Business Mailing Address						11 1011 1001	
11761 BEACH BLVD 12965 HUNTLEY MANOR DRIVE							
SUITE 9 JACKSONVILLE FL 32224					DO NOT WRITE IN THIS SPACE		
JACKSONVILLE FL 32246-699					3. Date Incorporated or Qualifed		
US					05/22/1996		
Principal Place of Business 2a. Mailing Address						ed For	
21 26					59-3379719 Not A	pplicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Add	ditional	
22 27					5. Certificate of Status Desired Fee Requ	ired	
City & State	y & State City & State		6. Election Campaign Financing \$5.00 May Be				
23	28		<u> </u>		Trust Fund Contribution Added to Fees		
Zip	Country	Zip Cour			8. This corporation owes the current year Intangible Personal Property Tax.	INO	
24	9. Name and Address of Current	29 30			Personal Property Tax. Yes 10. Name and Address of New Registered Agent		
	9. Name and Address of Current	registered Agent	81	Name	13, 14, 14, 14, 14, 14, 14, 14, 14, 14, 14		
SIMS, DEA			_	0	Land (D.O. Baraklander in Not Accordable)		
12965 HUNTLEY MANOR DRIVE			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
JACI	KSONVILLE FL 32224		83				
			84	City	85 Zip Coo	de	
				City	FL `` `		
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 applicable. (NOTE: Registered Agent signature required when reinstating)							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	3 IN 12	
TITLE	Р	☐ DELETE	1.1 TITLE		Change	Addition	
NAME	SIMS, DEA	1.2 NA		-		}	
STREET ADDRESS	12965 HUNTLEY MANOR DR 1.3 ST		1.3 STREET	ADDRESS		ļ	
CITY-ST-ZIP			1.4 CITY-S	T-ZIP	T105-000	☐ Addition	
TITLE	ST	☐ DELETE	2.1 TITLE		☐ Change	Addition	
NAME	SIMS, MICHAEL		2.2 NAME	İ		ĺ	
STREET ADDRESS	12000 (10111221 111111111111111111111111		2.3 STREET				
CITY-ST-ZIP	1 07.01.000771222 7 2		2. 4 CITY-S 3.1 TITLE	IT-ZIP	☐ Change	Addition .	
TITLE		_				_	
NAME			3.2 NAME	T ADDRESS			
STREET ADDRESS	~		3.4. CITY-S			1	
CITY-ST-ZIP			4.1 TITLE	II-LIF	☐ Change	Addition	
NAME I			4, 2 NAME	-			
STREET ADDRESS		4		T ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE	-		5.1 TITLE		Change	Addition	
NAME			5.2 NAME			,	
STREET ADDRESS	53\$		53 STREE	ADDRESS		}	
CITY-ST-ZIP	540		5.4 CITY-S	T-ZIP			
TITLE			6.1 TITLE		☐ Change	Addition	
NAME			6.2 NAME			ļ	
STREET ADDRESS	STREET ADDRESS		6.3 STREET ADDRESS			1	
CITY-ST-ZIP			6.4 CITY-S	T-ZIP			

CITY-ST-ZIP 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 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 changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR