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

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIF

FILED AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Jul 30 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mertham ANNUAL **RE**PORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P96000053536 (4) CONCEPT MARKETING INTERNATIONAL, INC. Principal Place of Business Mailing Address 1003 SE 17TH STREET 1003 SE 17TH STREET SUITE 202, 2ND FLOOR SUITE 202, 2ND FLOOR DO NOT WRITE IN THIS SPACE FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 3. Date Incorporated or Qualified 06/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0675714 Not Applicable Sulte Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year intangible Yes No 24 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FORMAN, MARTY SR. 4881 NW 22ND ST. STE A-11 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33313 83 City 85 Zip Code 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 regulred when reinstating) CR2E034 (5/98) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE 1.1 TITLE ___ DELETE FORMAN, MARTY SR. NAME 1.2 NAME 4881 NW 22ND STREET STE A-11 STREET ADDRESS 1.3 STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETÉ ☐ Change ☐ Addition NAME 2 2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP TITLE 3.1 TITLE DELETE Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE ___ DELETE L Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE 7000250423chinge Addition 5.1 TITLE DELETE -07/31/98--01071--**0**05 NAME 5.2 NAME ***150.00 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TiTLE DELETE ___ Addition

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. Mary

6.2 NAME

6.3 STREET ADDRESS

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from the desk of Marty Forman July 17-98

As per my phone conversations on June 200 I roused the person that I never received the 15 Notice for the annual report.

your associate odvise me that this uses or and to send in the preprient wills a ment to that effect.

Please be revised that is what I

I contracted your office again today Spoke with sean. he advised me tol sund it back agains. in which I am doing for the second time.

Thank "Yor for your considerations