PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham FOR Secretary of State FILED REINSTATEMENT DIVISION OF CORPORATIONS P96000055692 **DOCUMENT #** 98 APR 22 PM 12: 50 1. Corporation Name Target Marketing Group Inc. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business 805 South Magnolin Ave Site D P.O. Box 2991 REINSTATEMENT 97-98 Ocala fl. 34478 Ocala ft. 34478 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 4. Date Incorporated or Qualified To Do Business in Florida 3. New Mailing Office Address, If Applicable June 28, 1996 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number City & State City & State \$8.75 Additional Fee required Country Country for a Certificate of Status 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Officer and/or Director
(Do NOT Use Post Office Box Numbers) City / State / Zip Todd L Smith 2901 S.W. 4/5+St Sunte#2312 HEnry F. Allcott 2623 S.E. 274 St JAMES P MOSIEUR 3268 N.W. 68th St 900002502799---04/28/98--01062--006 ****900.00 ****900.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name Todd L SMITH Street Address (P.O. Box Number is Not Acceptable) 2901 S.W. 415+5+ Sute#2312 Suite, Apt. #, Etc. Ocala fl. 34474 State Zip Code 10. I, being appointed the registered agent of the above named corporation and familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. This corporation owes or has paid the current year (See other side for information Yes 🗹 Intangible Personal Property tax due June 30. 12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. 4/17/98 352-861-1474 SIGNATURE: