

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000070992

Corporation Name

SHANNON, ROSENBLOOM MARKETING, INC.

FILED  
Sep 15, 1999 8:00 am  
Secretary of State

09-15-1999 90001 040 \*\*\*550.00



Principal Place of Business  
MAGUIRE BLVD  
ORLANDO FL 32803-059

Mailing Address  
3660 MAGUIRE BLVD  
101  
ORLANDO FL 32803-059  
US

DO NOT WRITE IN THIS SPACE

Principal Place of Business

MAGUIRE BLVD

ORLANDO FL 32803-059

2a. Mailing Address

3660 MAGUIRE BLVD

101

ORLANDO FL 32803-059

US

3. Date Incorporated or Qualified

08/23/1996

4. FEI Number

59-3401160

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☒ No

Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIS, LEON F JR  
3660 MAGUIRE BLVD  
#101  
ORLANDO FL 32803-3059

81 Name

Rosenbloom, Brian C.

82 Street Address (P.O. Box Number is Not Acceptable)

3660 Maguire Blvd.

83

#101

84 City

Orlando

FL

85 Zip Code

32803

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]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6/29/99

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

CPD  
ROSENBLOOM, BRIAN C  
7280 WESTPOINTE BLVD. APT. #833  
ORLANDO FL 32835

☐ DELETE

VD  
SHANNON, TIMOTHY B  
13421 ARROWWOOD POINT  
ORLANDO FL 32828

☐ DELETE

SD  
WILLIS, LEON F JR  
8134 OAKLAND PLACE  
ORLANDO FL 32819

☒ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☒ Change ☐ Addition

3660 Maguire Blvd. #101

Orlando FL 32803

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE:

*[Signature]* REGISTERED

9-5-99

407-228-4444

CR2E034 (5/99)