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PROFIT CORPORATION ANNUAL REPORT 1998			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State a DIVISION OF CORPORATIONS				98 JAN 27 AM II: 48					
DOCUMENT # P96000082649  1. Corporation Name							SECRETARY OF STATE TALLAHASSEE, FLORIDA					
DF P.X. Marketing, Inc.									-4, 11.0	NIUA		
		Melling A					ļ					
Principal Place												
4548 No Federal Hwy 4548 No Federal Hwy												
Ft Lauderdale, FL Ft Lauderdale, FL 33308 33308							3. Date incorporated or Qu	alified	3a. Date of	Last Re	port	
2. Principal Place of Business 2a. Mailing Address							10-07-96 0997 4. FEI Number Applied For			Applied For		
21 26							65-0720407		<u> </u>		Not Applicable	
Sulte, Apl. #, 22	etc.	27 Sulle, /	Suite, Apt. #, etc.				5. Certificate of Status Des	ired		•	5 Additional Required	
City & State 23		City & 28	City & State				Election Campaign Fina Trust Fund Contribution	ncing		\$5.0	DO May Be ed to Fees	
Zip 24]	Country 25	Zip		30	untŋ	,	8. This corporation has list Florida Statutes	ility for	intangible to	ıx under	s. 199.032,	
	9. Name and Address of Curre		Agent	190			10. Name and Address of N			ent		
	. Bishins, Esq				81	Name						
4548 No Federal Highway					82	Street Addre	dress (P.O. Box Number is Not Acceptable)					
<u> </u>					83							
Ft Lauderdale, FL 33308						City			FL	86 Z	p Code	
11. Pursuent to I	the provisions of Sections 607.050	2 and 607.1508	. Florida Statut	les, the s	above	e-named corps	oretion submits this statemen	1 for the	• - 1	changin	o its registered	
office or regit agent. I am fi	elered agent, or both, in the State amiliar with, and accept the obliga LARRY W. 13	of Florida, Such Hons of, Section	ohange was e 607.0505, Fk	uthorize	d by	the corporatio	n's board of directors. I hereb	A accet	t the appoin	itment a	s registered	
	Signature, typed or printed name of reg	stered agent and	title if applicable				gent signature required when rein					
12. MLE	PVSTD	AND DIRECTOR	DELETE		13.	TITLE	ADDITIONS/CHANGES	O OFF		DIREC	TORS IN 12 Addition	
WE		<b>—</b>			NAME				-	_		
TREET ADDRESS MTY - ST - ZIP	7119 Via Marbe Boca Raton, FI					STREET ADDRESS CITY - ST - ZIP	anug.		<b>4</b> 4 2. <b>1</b> 1798(			
TILE	Boca Raton, Fi	1 33434	DELETE			TITLE					* DAdditon	
WE						IAME						
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TILE			DELETE		3.17	ITLE			□ Ch	ange	Addition	
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TILE +			DELETE	•	4.11				Ch	ange	Addition	
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TLE			DELETE		5.1 T				Сн	ange	Addition	
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MLE MAE			DELETE		6.1 T 6.2 N				Ch	ange	Addition	
TREET ADDRESS					6.3 S	TREET ADDRESS			_ <b>_</b>		_	
TY-ST-ZIP					6.4 C	ITY - ST - ZIP						
	ertify that the information supplied ndicated on this annual report or t											
that I am an o	officer or director of the corporation	in or the receiver	r or trustee em	powered								
SIGNATL	look 12 or Blook 13 If changed, or		Crai		ro	ta	1-16-98	0	51-77	2-76	300	
	SIGNATURE: SIGNATURE STITUTE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR								54-77 Da	2- / S ytime Pho		
							Date					

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