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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000072481 (9)

FILED Mar 17 1998 8:00am Secretary of State

MK MARKETING & CONSULTING, INC.					
Principal Place of Business Mailing Address				ı debiyêdi dir terin debiy delin debiy berin Ebiyi	CORID INDIA DIODI IDIELI MALI INDI
1501 ARGYLE DRIVE 1501 ARGYLE DRIVE FT. MYERS FL 33919 FT. MYERS FL 33919				DO NOT WRITE IN TH	HIS SDACE
				3. Date Incorporated or Qualified	115 SPACE
1				·	
2. Principal f	Place of Business	2a. Mailing Address		08/20/1997 4. FEI Number	Applied For
21 26			65-0792437	Applied For Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		27 City & State		5. Certificate of Status Desired	Fee Required
├─ ┐		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip Zip	Country	Trust Fund Contribution	Added to Fees
24	25	<u> </u>	30	8. This corporation owes or has paid the	current year Intangible
	9. Name and Address of Current		30	Personal Property Tax due June 30. 10. Name and Address of New Register	
CA	NAN, MICHAEL J		81 Name		ou rigoni
20 N ORANGE AVENUE					
SUITE 1400			82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
	RLANDO FL 32801		83		
					.,
			64 City	F	2ip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,			s, the above-named co	rnoration eulemite this statement for the number	o of phonoing its resistand
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					ļ
	Signature, typed or printed name of registered agen		: Registered Agent signature req	quired when reinstating) DAT.	E
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	PROSIDENT DECEMBER	☐ DELETE	1.1 TITLE		Change Addition
NAME	Michael De Almeida		1.2 NAME		
STREET ADDRESS	1501 Aegyle Deive		1.3 STREET AODRESS		
CITY-ST-ZIP	PT. Myers, FL 33919	DELETE	1.4 CITY-ST-ZIP		
TIFLE	VICE PRESIDENT	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition C
NAME OZOSET ADDOGGO	KAtherine H. DEALMEN 1501 Argyle Deive	i Citi	2.2 NAME		
			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	F 1. MYER, FC 33 17	DELETE	2.4 CITY-ST-ZIP		Change Addition
NAME		□ priffic	3.1 TITLE		[] Change
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP					
TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		P Semilo P Viniting
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied with	this filing does not qualify for		Section 110 07/9\/i\ Florida Statutos further	

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 applied by port 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 register by susteed 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 or an attribution with an address.

CIONATURE.