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 # P97000077002 (8)

OND MARKETING, CO.

Principal Place of Business

Mailing Address

FILED May 05 1998 8:00am Secretary of State



320 GRAND CONCOURSE MIAMI SHORES FL 33138			320 GRAND CONCOURSE MIAMI SHORES FL 33138		DO NOT WRITE IN	N THIS SPACE		
					3. Date Incorporated or Qualified 09/05/1997		,	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	I A	applied For	
21		26			65-0804404	N	ot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	·		Election Campaigri Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Countr		8. This corporation owes or has paid	the current year Ir	stangible	
24	25	29	30			Personal Property Tax due June 30. Yes No		
	g. Name and Address of Curre	ent Registered Agent		.1	10. Name and Address of New Regi	stered Agent		
_	WELL, NORMAN C		8	1 Name	e			
200	O SOUTH BISCAYNE BLVD.		B2 Street Ad		et Address (P.O. Box Number is Not Acceptable	<u> </u>		
SU	ITE 2100		Oli Oci i Kadi			, 		
MIA	AMI FL 33131		В	3				
			8	A City		les Zin	Cada	
			l°	4 City		FL 85 Zip	Code	
office or r	registered agent, or both, in the Stat im familiar with, and accept the obli	e of Florida. Such change was	authorized I	by the co	ed corporation submits this statement for the pur priporation's board of directors. I hereby accept t	the appointment as	s registered	
	Signature, typed or printed name of registered a		TE Registered A	gent signatu	ure required when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	Ares dont De rech	→ □ DELETE	1.1 TITLE			☐ Change	L Addition	
NAME	Mesident/arestr DELETE NORMAN DANGEL NORMAN DANGE		1.2 NAM					
STREET ADDRESS	TOPEN AND FOR	Wight And Party Allowed 13:		et address	S			
CITY-\$T-ZIP	DAO Grand Called	Me, 12 33135	1.4 CITY	ST - ZIP				
TITLE		☐ DELETE 2.17				L Change	Addition	
NAME			2.2 NAMI					
STREET ADDRESS			2.3 STRE	ET ADDRESS	3			
CITY-ST-ZIP			2. 4 CITY	- ST - ZIP				
TITLE		L] DELETE	3.1 TITLE			Change	Addition	
NAME			3.2 NAM					
STREET ADDRESS			3.3 STRE	T ADDRESS	3			
CITY-ST-ZIP			3.4. CITY	· ST - ZIP				
TITLE		☐ DELETE	4.1 TITLE		1	☐ Change	Addition Addition	
NAME			4. 2 NAM	£				
STREET ADDRESS			4.3 STRE	T ADDRESS	s			
CITY-ST-ZIP			4.4 CITY	ST-ZIP				
TITLE		DELET e	5.1 TITLE			L. Change	Addition	
NAME			5.2 NAMI					
STREET ADDRESS			5.3 STRE	ET ADDRESS	s			
CITY-ST-ZIP			5.4 CITY	ST-ZIP				
TITLE	<u>-</u> .	☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME			6.2 NAMI					
STREET ADDRESS			6.3 STRE	ET ADDRESS				
CITY-ST-ZIP			6.4 CITY	S1-21P				
14. hereby c	pertify that the information supplied	with this filing does not qualify	for the exem	ption sta	ited in Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the	e information	
officer or Block 12	on this annual report or supplemen director of the corporation or the rec or Block 13 if changed, or on an atl	ceiver or trustee empowered to achment with an aridress.	execute this	report a	ignature shall have the same legal effect as if m as required by Chapter 607, Florida Statutes; an	d that my name as	opears in	