## 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 # P97000078925 (9)

**NEXUS MARKETING, INC.** 

## FILED Mar 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2457A S. HIAWASSEE RD., STE. 176 ORLANDO FL 32835 2457A S. HIAWASSEE RD., STE. 176 ORLANDO FL 32835 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/08/1997 2. Principal Place of Business 2a. Mailing Address Applied For 59-3465100 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zφ 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes Yes 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 2457A S. HIAWASSEE RD., STE. 176 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32835 83 84 City Zip Code 85 11. 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registerest agest and title it apple able (NOTE Registered Agent signature required hen reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change ■ Addition NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS **B** DELETE 14 CITY-ST-ZIP CITY-S1-ZIP Change Addition 21 TITLE TITLE ndy HARRU NAME 2 2 NAME ecretary 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP Sandy Harris DELFTE Addition 3 1 TITLE Change TITLE 32 NAME NAME Treasurer STREET ADDRESS 3.3 STREET ADDRESS (same) CITY-ST-ZIP 3.4. City-ST-ZIP Sandy Harris DELETE Change Addition TITLE 4.1 TOTLE 4. 2 NAME NAME Director STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP Change Paul Sherrod DELFTE Addition 51 TITLE TITLE 5.2 NAME NAME Director STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Paul Pedrac Director TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST- ZIP CITY-ST-ZIP

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 supplienmial appears in trusted empoyered 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 alter brieff with an appears in

SIGNATURE:

407-872-3462