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### **PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

#### Sandra B/ Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000080669 (9)

MONTANA MARKETING, INC.

# **FILED** Mar 19 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1507 ARGYLE DRIVE #207 1507 ARGYLE DRIVE #207 FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/16/1997 2a. Mailing Address 26. Sawe Principal Place of Business 4. FEI Number Applied For Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Country 8. This corporation owes or has paid the current year Intangible ☐ Yes ☐ No Personal Property Tax due June 30. 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HENDERSON, KENNETH L 1507 ARGYLE DRIVE #207 FORT LAUDERDALE FL 33312 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 bligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change 1 1 1/11 TITLE HENDERSON, KENNETH L 1.2 NAME NAME 1507 ARGYLE DRIVE #207 STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33312 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 21 TITLE TITLE NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS 2 4 CITY-ST-ZIP CITY-SI-ZIP DELETE TITLE 31 TITLE NAME 3 2 NAME 3.3 STREET ADDRESS 34 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELFTE Change Addition 5 1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY-ST-ZIP I hereby certify that the information indicated on this annual report or

I qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information of and accurate and that my signature shall have the same legal effect as if made under oath; that I am an wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the cor Block 12 or Block 13 if cha 2/10/08

SIGNATURE: N