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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # **P97000093446**1. Corporation Name

HANDS-ON MARKETING, INC.

Principal Place of Business 2500 HOLLYWOOD RIVE STE 212

2500 HOLLYWOOD BLVD., STE, 212

**FILED** 

May 01, 1999 8:00 am Secretary of State

05-01-1999 90093 003 \*\*\*150.00

HOLLYWOOD F		HOLLYWOOD FL 33020					
					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed		1
					10/30/1997 4. FEI Number		
2. Principal Pl	ace of Business	2a. Mailing Address	ddress			<u> </u>	oplied For
21		26			65-0817403		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional equired
22		27				<del></del>	<del></del>
City & State		City & State			6, Election Campaign Financing		May Be
23		28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible Personal Property Tax  X Yes  No		
24	25	<del></del>	30	<del> </del>	Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Registered	Agent	
MAN	ELLA, ROSE				OSS H. MANELLA ESO.		_
	HOLLYWOOD BLVD., STE. 212	- 82 Street Addre			ess (P.O. Box Number is Not Acceptable)		
	LYWOOD FL 33020				500 HOLLYWOOD BLVD. #212		
HULI		ļ	83	OU_YW00D. FD. 33020		}	
	•		ł	84 City		85 Zip	Code
				H	OLLYWOODFL	·     330	020
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the ab	ove-named cor	rporation submits this statement for the purpose of	changing its	s registered
office or re	egistered agent, or both, in the State of in familiar with, and accept the obligation	i Florida. Such change was au ons of, Section 607.0505, Flori	itnorizea ida Statu	by the corpora	tion's board of directors. I hereby accept the appoint	INTIMENT OF IT	gistered
	1///	,			ROSS H. MANELLA ESO. 4	/12/99	Ì
SIGNATURE	Signature, typed of printed name of registered agent	and title if applicable. (NOTE:	Registered .	Agent signature requi	ROSS H. MANELLA ESQ. 4	1 + 41 77	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	
TITLE	DPS	☐ DELETE	1.1 TIT	LE		Change	☐ Addition
NAME	SCHWARTZ, HARRIETTE		1.2 NA	ME É			
STREET ADDRESS	2500 HOLLYWOOD BLVD., STE.	212	1.3 STI	REET ADDRESS	•		ł
CITY-ST-ZIP	HOLLYWOOD FL 33020		1.4 CIT	Y-ST-ZIP			
TITLE	DV	☐ DELETE	2.1 TIT			Change	Addition
NAME	SCHWARTZ, MITCHELL		2.2 NA	ME I			
STREET ADDRESS	2500 HOLLYWOOD BLVD., STE.	212	2.3 ST	REET ADDRESS			}
	HOLLYWOOD FL 33020			ry-st-zip			
CITY-ST-ZIP	DV	☐ DELETE	3.1 TIT		7/7/18	Change	Addition
TITLE	SCHWARTZ, JERRY		3.2 NA	•	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<i>y</i> -1	
NAME	2500 HOLLYWOOD BLVD., STE.	212		i i	•		ł
STREET ADDRESS		£1£		REET ADDRESS		-	1
CITY-ST-ZIP	HOLLYWOOD FL 33020	□ DELETE ·	3.4, CI 4.1 TIT	ry-ST-ZIP		[ ] Change	☐ Addition
TITLE		□ Acreic .	3	J			
NAME	•		4. 2 NA				
STREET ADDRESS	•			REET ADDRESS	•		
CITY-ST-ZIP				Y-ST-ZIP		Chanca	☐ Addition
TITLE		☐ DELETE	5.1 T/7	<b>I</b>		Change	
NAME			5.2 NA	1			Ì
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP		<u></u>	
TITLE	•	☐ DELETE	6.1 TIT	1		Change	Addition
NAME	•		6.2 NA	ME .			į
STREET ADDRESS			6.3 ST	REET ADDRESS		•	i

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 annual report 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 receiver or trustee 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 op an attachment with an address, with all other like empowered.

**SIGNATURE:** 

REQUIRED Harriette Schwartz

4/12/99