## 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 #
1. Corporation Name P97000095636 (1)

"ON THE MARK" PROMOTIONS, INC.

## **FILED** May 01 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	Mailing Address			
10097 CLEARY BLVD., STE. 351		10097 CLEARY BLVD.	10097 CLEARY BLVD., STE. 351			
PLANTATION FL 33324			PLANTATION FL 33324			
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 11/06/1997
	Place of Business	2s. Mailing Address	2a. Mailing Address			4 FEI Number Applied For
21		26				65-0803988 Not Applicable
i Suite, Adt.	.#, etc.	Suite, Apt. #, etc.	<del></del>			5. Certificate of Status Desired  \$8.75 Additional
22 City & Stat	la la		City & State			Fee Required
23		<b>⊢</b> , '	28			8. Etection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes or has paid the carrent year Intangible
24	25	29	30	. ,		Personal Property Tax due June 30. X Yes No
	9, Name and Address of Curre		1001			10. Name and Address of New Registered Agent
				81	Name	
10097 CLEARY BLVD., STE. 351				82	Stroot Addre	ess (P.O. Box Number is Not Acceptable)
PL		62 Street Aut		Street Addire	ess (1.0. Box Normber is Nor Acceptable)	
				83		
				84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corr						
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE						
12. OFFICERS AND DIRECTORS 13.					Tit digitation (ordered	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	OP .	DELETE	1.1 TI	TL{		☐ Change ☐ Addition
NAME	HORNE, PARA		1.2 N/	AME	l	
STREET ADDRESS	ARROW OF PARTY OF ARE			TREET	ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33324		1.4 0	ITY-S	T-21P	,
TITLE		DELETE 2.1		ŢĻĒ		☐ Change ☐ Addition
NAME			2.2 N/	AME	Ì	
STREET ADDRESS			2.3 \$1	TREET.	ADDRESS	
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NAME .			3.2 N/	AME		
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NAME			4. 2 N	AME	İ	
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CITY-ST-ZIP			4.4 CI	TY-S	I - ZIP	
TITLE	DELETE 5.1 TI		TLE		☐ Change ☐ Addition	
NAME			5 2 N/	4ME		
STREET ADDRESS			5.3 ST	REET	ADDRESS	
CITY-ST-ZIP		T 85:	5.4 CI		1 - ZIP	
TITLE	;	DELETE	6.1 70			Change Addition
NAME	•		6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET	ADDRESS	ļ
CITY-ST-ZIP		and their films about 100 and 100 and	6.4 CF			Conting 110 07/2Vi) Elecido Statutas I furibar cartifu that the information

Inereoy ceruly that the imprimation supplies with this filling 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 is rupy 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 dorporation or the precion of the dorporation of the dorporation or the precion of the dorporation or the dorporation or the