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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000095636**1. Corporation Name

"ON THE MARK" PROMOTIONS, INC.

Principal Place of Business 10097 CLEARY BLVD.. STE. 351 PLANTATION FL 33324 Mailing Address

10097 CLEARY BLVD., STE. 351 PLANTATION FL 33324

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90089 009 ***150.00



DO NOT WRITE IN THIS SPACE

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						11/06/1997				<u> </u>
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			A	pplied For
a]		26				_65-0803988			N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-		· · · · · · · · · · · · · · · · · · ·	5. Certifcate of Status De	esired 🗆	 I	-	Additional equired
City & State		City & State			 	6. Election Campaign Fin	Li			May Be
3		28				Trust Fund Contributio	on			to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes		ear In i e		
25 29			30			Personal Property Tax			Yes	□No
	9. Name and Address of Current	Registered Agent		T		10. Name and Address of	of New Regis	stered.A	gent	
				81	Name					
HORNE, PARA				82 Street Address (P.O. Box Number is Not Acceptable)						
1009	7 CLEARY BLVD., STE. 351			and the second s						
PLAN	NTATION FL 33324			83	-					
					0"				os Zin	Code
				84	City			FL	85 Zip	Code
office or re agent. I as	to the provisions of Sections 607.0502 sgistered agent, or both, in the State or m familiar with, and accept the obligation Signature, typed or printed name of registered agent	f Florida. Such change wa ons of, Section 607.0505,	is authorize Florida Stat	a by th tutes.	ie corporatio	on's board of directors. There	by accept the	appoin	tment as r	egistered
					vennture required					
					signature required			RS AND	DIRECT	ORS IN 12
12.	OFFICERS AND	DIRECTORS	13.		signature required	ADDITIONS/CHANGES		RS ANI		
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I. 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 informatic 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 trusteed 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 on an attachment with an address, with all other like empowered.

SIGNATURE: X

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

x 2/23/99

954) 473-256

CRZEUC