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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DÉPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000106186 (4)

FILED Apr 24 1998 8:00am Secretary of State

| CONSU | JMER DIRECT ONLINE, INC |). | • | | | | | |
|---|--|----------------------------------|---|-----------------------|----------------------|---|---------------|---------------|
| Principal Place of Business Mailing Address | | | | | | - t immième era ráfti: seair easir ádtri éathr iteir Mhile | | |
| 4631 NW 31ST AVE., SUITE 305 4631 NW 31ST AVE., SUITE 305 | | | | | | | | |
| FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 | | | |) | | DO NOT WRITE IN THIS SE | PACE | |
| | | | | | | 3. Date Incorporated or Qualified | NOC. | |
| | | | | | | 12/18/1997 | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | | 4 FEI Number | Ar | oplied For |
| 21 | | 26 | 26 | | | 65-0803309 | N(| ot Applicable |
| Suite, Apt. #, etc. | | | | | | 5. Certificate of Status Desired | , | Additional |
| 22 | | 27 | | | | <u> </u> | | equired |
| City & Stat | 6 | <u>├</u> ── | City & State | | | Election Campaign Financing Trust Fund Contribution | | May Be |
| Zip | Country Zip Co | | | intry | | | | |
| 24 | 25 | 29 | 30 | л. _П . у | | 8. This corporation owes or has paid the curre Personal Property Tax due June 30. | | angible No |
| 67 | 9. Name and Address of Curren | | 130 | T | | 10. Name and Address of New Registered A | | |
| TU | LLOCH, CLIFTON | | | 81 | Name | | | |
| 4631 NW 31ST AVE., SUITE 305 | | | | 82 | Stroot Addro | ess (P.O. Box Number is Not Acceptable) | | |
| | . LAUDERDALE FL 33309 | | | | Dated Addie | loress (P.O. Box number is Not Acceptable) | | |
| | | | | 83 | <u>-</u> | | | |
| | | | | 84 | City | | 85 Zip | Code |
| | | | | LΙ | • | FL | l I ' | ŀ |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both 17 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 | | Jullo | | - | | 4/8/98 | 5 | |
| Signature typed or printed name of registered agent and title if applicable (NOTE: Re | | | | | nt signature require | od when reinstating) VATE | | |
| 12. TITLE | DELETE | | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND D | Change | RS IN 12 |
| NAME | TULLOCH, CLIFTON | | • | 1.1 TITLE 1.2 NAME | | L | Cricings | Naccion |
| STREET ADDRESS | 4631 NW 31ST AVE., SUITE | 305 | 1 | | 2010004 | | | |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33309 | 000 | 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP | | | | | |
| TITLE | | | 2.1 T | | 1-11 | | Change | Addition |
| NAME | | | 2.2 N | 2.2 NAME | | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | ADDRESS | | | |
| CITY-ST-ZIP | _ | | 2. 4 CITY - ST - ZIP | | T-ZIP | · | | |
| TITLE | DELETE | | 3.1 T | 3.1 TITLE | | | Change | Addition |
| NAME | | | 3.2 N | AME | | | | |
| STREET ADDRESS | | | 3.3 S | TREET | ADDRESS | | | |
| CITY-ST-ZIP | The state of the s | | | ITY-S | T- ZIP | | 7 | |
| TITLE | DELETE | | 4.1 10 | | | L | _ Change | Addition |
| NAME | | | 4 2 N | | | | | |
| STREET ADDRESS | | | , i | | ADDRESS | | | 1 |
| CITY-ST-ZIP TITLE | | DELETE | 4.4 U | ITY-ST | - ZIP 1 | | Change | Addition |
| NAME | | | 5.1 N | | } | _ | - onange | - Mullion |
| STREET ADDRESS | | | | | ADDRESS | | | |
| CITY-ST-ZIP | } | | 5.4 CITY-S | | - 1 | | | ł |
| TITLE | | DELETE | 6.1 TITLE | | | | Change | Addition |
| NAME | Name | | 6.2 N | 6.2 NAME | | _ | - | |
| STREET ADDRESS | | | 6.3 S | TREET A | address | | | 1 |
| CITY-ST-ZIP | | | | TY-ST | | | | |
| 14. I hereby o | certify that the information supplied w | ith this filing does not qualify | for the exe | tqme | ion stated in S | Section 119.07(3)(i), Florida Statutes. I further certi e shall have the same legal effect as if made unde | fy that the | information |
| officer or o | director of the corporation or the record Block 13 if changed or on an alta | civer or trustee empoyered to | execute | this r | eport as requi | ired by Chapter 607, Florida Statutes; and that my | name ap | pears in |

IGNATURE: MALE JULION TULION TULION 41