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

PROFIT CORPORATION ANN JAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretar of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

BOSE MARKETING INC.

Principal Place of Business

Mailing Address

FILED Apr 26, 1999 8:00 am Secretary of State 04-26-1999 90143 027 ***150.00

2845 N. MILITARY TRAIL, SUITE #5									
WEST PALM BEACH, FL. 33409						DO NOT WRITE IN THIS SPACE			
					3. Date	Incorporated or Qualife	ed		
2. Principal P	Place of Business	2a. Mailing Address				Num ber 5-0816426		<u> </u>	blied For Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Cert	ifcat ∋ of Status Desired		\$8.75 A Fee Rec	
City & Stat	e	City & State			I	tion Campaign Financin	g \Box	\$5.00 Added to	,
Zip	Countr/ Zip		Coun	Country		corporation owes the cu	rrent vear In		7. 5052
24	25	29	9 30		I				□No
	9. Name and Address of Cur	rent Registered Agent				e and Address of New	Registered	Agent	
BOSE	· S. POTINE	EN/	1	31 Name					
2884 TENNIS CLUB DR#304				82 Street Add ess (P.O. Box Number is Not Acceptable)					
	T PALM BEA			33					
7003	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•	34 City			FL	85 Zip C	oc e
11. Pursuant	to the provisions of Sec ions 607.	0502 and 607.1508, Florida Sta	tutes, the abo	ove-named	cort oration subr	mits this statement for th	e nurnose of	changing its r	egistered
office or re agent. Lai	egistered agent, or both, in the St m familiar with, and account the ob	ate of Florida. Such change was ligations of, Section 607.0505, F	s authorized l Flor da Statut	by the corp es.	ooration's board o	f directors. I hereby acc	ept the appo	ntment as reg	is ered
SIGNATURE	PostoRation	Quie IPRES	JDEN	7)		7 4.	DA 190	}	
	Signature, typed or printed name of registered	agent ar Mitte if applicable (NO	TE: Registered A	gent signature	require d when reinstating	lg) (e)	AJO ATE		
12.	CFFICERS	AND DIRECTORS	13.		ADDIT	FIONS/CHANGES TO C	FFICERS At		
TITLE	BOSE S. POTINE	NT ØDELETE	1.1 TITL	₿	BACE	S. POTING	- A 1/	Change	Addition
NAME	141 E. RIVERSI		1.2 NAM		2030	TONNO	214	DO 41	204
STREET ADDRESS	JUPITER, FL.	33469	1.3 STR	EET ADDRESS	2089	TENNIS	CAUD	DK H	707
CITY-ST-ZIP			1.4 CITY	-ST-ZIP	WEST	PALM BEL	CH_t	<u> </u>	17
TITLE		☐ DELETÉ	21 TITU	E				Change	Addition
NAME			2.2 NAM	E					
STREET ADDRESS			2.3 STR	EET ADDRESS	:				
CITY-ST-ZIP			2. 4 CIT	-ST-ZIP					
TITLE		DELETE	3.1 TITL	E				Change	Addition
NAME			3.2 NAM	E					
TREET ADDRESS			3.3 STR	ETADDRESS	1				ĺ
CITY-ST-ZIP			3.4. CIT	'-ST-ZIP	<u> </u>				
TITLE		☐ DELETE	4 1 TITLI	.				Change	Addition
NAME			4.2 NAN	IE					
STREET ADDRESS			4.3 STRI	ET ADDRESS					
CITY-ST-ZIP			4.4 CITY		<u> </u>				
TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME			5 2 NAM						
STREET ADDRESS			ě	ET ADDRESS					
CITY-ST-ZIP			5 4 CITY						
TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			62 NAM						1
STREET ADDRESS				ET ADDRESS	1				ł
0.74 67 76			■ 6 A CITY	.ST. 7IP	1				

14. Thereby pertify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental arroad report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I arroan officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 307, Florida Statutes; and that ny name appears in Block 12 or Block 13 if chapter, or on any attactoment with an address, with all other like empowered.

SIGNATURE:

E·S·POTINENI)