SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED 2005 FOR PROFIT CORPORATION
ANNUAL REPORT

Secretary of State

1. Entity Nan	MENT # P9800001468 MARKETING INTERNATION				cer etai	y or Stat	
Principal Place 7380 SAND STE 600 ORLANDO, F	LAKE RD	vailing Address 7380 SAND LAKE RD STE 600 ORLANDO, FL_32819			1 81 8		
E	OO NOT WRITE I	CE	04152005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 59-3499363 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required				
1201 HAY	6. Name and Address of Current Regi ATION SERVICE COMPANY 'S STREET SSEE, FL 32301	DO NOT WRITE IN THIS SPACE					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating).							
Fil. After M.	E NOWIS FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	S. Election Campaign Final Trust Fund Contribution.	ncing _ \$5.	.00 May Be ed to Fees	·= .1-		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FARWELL, ROGER 7380 SAND LAKE RD. STE 600 ORLANDO, FL 32819	- A					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD KOENIG, STUART 2 MANHATTANVILLE RD PURCHASE, NY 10577			0	4/ <u>26</u> 705-801		58.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ANDREW, MARCUS 7380 SAND LAKE RD STE 600 ORLANDO, FL_32819	a semi-			NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							المداد
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
indicated of the con	ertify that the information supplied with this f on this report or supplemental report is true poration or the receptor or trustee empowers or on an attachment with an address, with a	and accurate and that my signat d to execute this report as requir	nption stated in Secure shall have the sized by Chapter 607,	ction 119.07(3)(i), ame legal effect Florida Statutes:	, Florida Statutes. I for as if made under oa and that my name a	urther certify tha th, that I am an appears in Block	t the information officer or director < 10 or Block 11 if

418/05

407-126-1000 Deysime Phone #