SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

SIGNATURE:

**PROFIT** FLORIDA DEPARTMENT OF STATE FILED CORPORATION Katherine Harris ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 99 SEP 13 AH 11: 12 1999 DOCUMENT #

1. Corporation Name P98000024150 SECRETARY OF STATE ALLAHASSEE, FLORIDA SGR MARKETING, INC. Principal Place of Business Mailing Address 6020 BAHIA DELMAR CIR #121 ST PETERSBURG FL 33715 6020 BAHIA DELMAR CIR #121 ST PETERSBURG FL 33715 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/13/1998 2. Principal Place of Business 21 2340 Stak Road 580 Applied For 2a. Mailing Address 2340 State Road 580 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing  $\Box$ Trust Fund Contribution Added to Fees 8. This corporation owes the current year Yes 🔀 No Intangible Personal Property. us 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Scott Street Address (P.O. Box Number is Not Acceptable ROIX, SCOTT 6020 BAHIA DELMAR CIR #121 7676 ST PETERSBURG FL 33715 83 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 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 and familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable (2/33)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. PŠ Change Addition 1.1 TITLE TITLE \_\_\_ DELETE Roix SCOTT 7676 Aralia Way CR2E034 ROIX, SCOTT 1.2 NAME NAME 6020 BAHIA DELMAR CIR #121 1.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33715 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 700002989247—-1 -09/17/99--01002--006dion \*\*\*\*\*550.00 \*\*\*\*\*550.00 2.4 CITY-ST-ZIP CITY-\$T-ZIP 3.1 TITLE DELETE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition DELETE TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP C/TY-ST-Z/P Thereby 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 information 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 trustee 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 or or an attachment with an address.