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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000024506**1. Corporation Name

MARKETING ON THE MOVE, INC.

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90234 007 \*\*\*150.00



							<u> </u>
Principal Plac	e of Business	N	lailing Address				1 18811881 (18 38181 18115 Salft 88111 88111 88112 11815 SIEBL BILL SALLE SALLE
4432 BROADWAY STREET 4432 BROADWAY STREE							
LAKE WORTH FL 33461		L	LAKE WORTH FL 33461				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed
							03/16/1998
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For
31		26	<del>-</del> 7				65-082335/ X Not Applicable
Suite, Apt. #, etc.		-120	Suite, Apt. #, etc.				_ \$8.75 Additional
22	,	27	·				5. Certifcate of Status Desired Fee Required
City & Stat	le .		City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Country		Zip	Cou	intry		8. This corporation owes the current year Intangible
24	25	29		30			Personal Property Tax. Yes No
	9. Name and Address of Curren	t Regi	stered Agent		<u> </u>		10. Name and Address of New Registered Agent
					81	Name	
HUBBARD, MARGARET M				82 Street Addr		Street Addr	ress (P.O. Box Number is Not Acceptable)
4432 BROADWAY STREET							
LAK	E WORTH FL 33461				83		
					84	City	85 Zip Code
					04	Oity .	FL   FL   FL   FL   FL   FL   FL   FL
SIGNATURE	Signature, typed or printed name of registered ager OFFICERS AN			Registered	Agen	t signature require	d when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OFFICERS AIN	UUIN	DELETE	1.1 TI	TLE		☐ Change ☐ Addition
NAME :	HUBBARD, MARGARET M		<u> </u>	1.2 N		Ĭ	— · · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	4432 BROADWAY STREET					ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33461				TY-SI		
TITLE	D		☐ DELETE	2.1 7			Change Addition
NAME	HUBBARD, DAVID DEE		_	2.2 N		ĺ	
STREET ADDRESS	**** 556 * 514 * 414 * 57555					ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33461				ITY-S		
TITLE	Ente Wolffitte Gotor		DELETE	3.1 TI		·	☐ Change ☐ Addition
NAME				3.2 N	AME		•
STREET ADDRESS				3 3 51	REET	ADDRESS	
CITY-ST-ZIP				3.4. C	ITY-S	T-ZIP	
TITLE			☐ DELETE	4.1 TI	TLE		☐ Change ☐ Addition
NAME	•			4.2 N	AME		•
STREET ADDRESS				4.3 ST	TREET	ADDRESS	
CITY-ST-ZIP		_		4.4 CI	TY-\$1	T- ZIP	
TITLE			☐ DELETE	5.1 TI	πE	- T	☐ Change ☐ Addition
NAME				5.2 N			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP					TY-S1	r-ZIP	
TITLE			☐ DELÉTE	6.1 Ti			☐ Change ☐ Addition
NAME				62 N			
STREET ADDRESS				6.3 S	REET	ADDRESS	
	1			1	m	r and	

14. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

561-6428131