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

**PROFIT** CORPORATION ANNUAL REPORT 4 DOCUMENT # 2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country 25

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Wilson's MARKETING SoluTions, INC. 3278 Sheeringham Rd Orlando Plin 32808 Same 3. Date Incorporated or Qualifed 2a. Mailing Address Applied For 59-3511347 21 Not Applicable 26 Suite, Apt, #, etc. \$8.75 Additional 5. Certifcate of Status Desired AMC Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be  $\Box$ 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. (E)NO 24 20 30 ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TICE, Somes E. 16220 SW. 280Th ST HomesTead F/A 33031 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code 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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1.1 TITLE ☐ Change ☐ Addition NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition 2.1 TITLE Change 2.2 NAME **700024572767** 11/10/03--01100--005 \*\*19 2.3 STREET ADDRESS STREET ADDRESS \*\*150,00 CiTY-ST-ZIP 2.4 CITY-ST-ZIP Change TITLE 3.1 TITLE \* Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3,4, CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE TITLE 5.1 TITLE [ ] Change ☐ Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Addition ☐ DELETE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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

SIGNATURE:

CR2E034 (11/98)

## JAMES E. TICE ASSOCIATES

Accountants 16220 S.W. 280th Street Homestead, Florida 33031

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mali protra dio les

Telephone: (305) 247-3700 Fax: Call First

Cellular Phone: 305-322-5715

October 26, 2003

Annual Report Filings
Division of Corporations
P. O. Box 6327
Tallahassee, Florida
32314

Gentlemen.

Re: Wilson's Marketing Solutions, Inc. P98000044072 3278 Sheringham Dr. Orlando, Florida 32808

Please be advised that this company never received the annual report form for filing the annual report for the year 2003. Enclosed please find check in the amount of \$150.00 and a completed annual report form for the year 2003.

Please reinstate this corporation at your early convenience.

Thank you for this consideration.

James E. Tice
Accountant