Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90038 041 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000051470

1. Corporation Name

re mari	KETING, INC										
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Principal Place of Business Mailing Address											
6809 BARNWELL DRIVE 6809 BARNWELL DRIVE BOYNTON REACH FL 33437 BOYNTON BEACH FL 33437											
BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33437							DO NOT WRITE IN THIS SPACE				
						į	3. Date incorporated or Qualifed				
		-				- [06/05/1998			<i>,</i>	
2. Principal P	lace of Business	2a. Mailing Addres	ss				4. FEI Number		A	plied For	
21		26	26						No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, e	Suite, Apt. #, etc.				5 Certifcate of Status Desired		\$8.75		
22		27	7				5. Certificate of Status Desired		Fee Re	equired	
City & Stat	e .	City & State	City & State				6. Election Campaign Financing	\Box	\$5.00		
23		28				Trust Fund Contribution		Added	to Fees		
Zip	ip Country . Zip			Country			8. This corporation owes the curr	ent year In		₩No	
24	25 29 30						Personal Property Tax.		Yes	MONO	
'	9. Name and Address of Current	Registered Agent		0.4			10. Name and Address of New F	ceg isterea	Agent		
MAN	DICHARD D			81	Name						
MAY, RICHARD D				82	Street A	Address (P.O. Box Number is Not Acceptable)					
6809 BARNWELL DRIVE BOYNTON BEACH FL 33437				_							
BUT	NION BEACH FL 33437			83	1		•				
				84	City				85 Zip	Code	
								FL			
11, Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida	Statutes, the a	d by	e-named o	corporation'	ation submits this statement for the s hoard of directors. I hereby accer	purpose o	i changing its intment as re	registered gistered	
office of r	m familiar-with, and accept the obligation	ons of Section 607.05	05, Florida Sta	tutes							
SIGNATURE											
0.0.0	Signature, typed or printed name of registered agent		(NOTE: Registere		nt signature re	quired w	hen reinstatung) ADDITIONS/CHANGES TO OF	DATE	ND DIRECTO	DPS IN 12	
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OF	FILERS A	Change	Addition	
TITLE	Literioent, Limita india Ollocaini.			1.1 TITLE							
NAME	RICHARD D. MAY 6809 BARNULL DRIVE			1.2 NAME						İ	
STREET ADDRESS				1.3 STREET ADDRESS							
CITY-ST-ZIP	BOYNTON BCH, FL. 3			aty-s	iT-ZIP				Change	Addition	
TITLE	AIGE LIESTOCK LOCK			TILE					(L) 01/21/30		
NAME	ECLENTINITY			2.2 NAME							
STREET ADDRESS	ADDRESS 6809 BARNWELL DRIVE			2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP						1	
CITY-ST-ZIP	1304-01-01 (10-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				ST-ZIP				Change	Addition	
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NAME	ļ		t t	IAME						Ţ	
STREET ADDRESS					TADDRESS						
CITY-ST-ZIP	DELETE			3.4, CITY-ST-ZIP					☐ Change	Addition	
TITLE				4.1 TITLE							
NAME				NAME							
STREET ADDRESS					TADORESS					1	
CITY-ST-ZIP					T-ZIP				. Change	Addition	
TITLE		□ D€I		MLE				•	. L Griange	L. 70000011	
NAME				AME							
STREET ADDRESS				T ADDRESS				· ·			
CITY-SI-ZIP					ST-ZIP				[] Change	Addition	
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14. I hereby certify that the information supplied with his 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 of the receiver of restee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changes, or on an attaction of the corporation of the receiver of the corporation of the receiver of the corporation
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

CR2F034 (11/98)