

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2004 08:00 AM
Secretary of State

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|---|---|
| DOCUMENT # P98000054064 1. Entity Name WEBMASTERS MARKETING, INC. |  |
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| Principal Place of Business 2740 SW MARTIN DOWNS BLVD SUITE 250 PALM CITY, FL 34990 US | Mailing Address 2740 SW MARTIN DOWNS BLVD SUITE 250 PALM CITY, FL 34990 US |
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DO NOT WRITE IN THIS SPACE



04282004 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0853564 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent STIRN, EVELYN 2740 SW MARTIN DOWNS BLVD, SUITE 250 PALM CITY, FL 34990 | DO NOT WRITE IN THIS SPACE |
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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) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
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| 10. OFFICERS AND DIRECTORS | | DO NOT WRITE IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D STIRN, EVELYN 2740 SW MARTIN DOWNS BLVD, SUITE 250 PALM CITY, FL 34990 | |
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05/06/04-80014-003 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Evelyn Stirn **4-28-04** **772 260-3080**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #