

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

0202890

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90246 010 ***158.75

DOCUMENT # P98000059464

1. Corporation Name

MANAGEMENT AND MARKETING SYSTEMS INTERNATIONAL, INC.

Principal Place of Business

**652 NORTHEAST 77TH STREET
MIAMI FL 33138**

Mailing Address

**652 NORTHEAST 77TH STREET
MIAMI FL 33138**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/06/1998

4. FEI Number

65-0848855

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible

Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PSTD** ☐ DELETE
NAME **ANDRUS, LAWRENCE**
STREET ADDRESS **652 NORTHEAST 77TH STREET**
CITY-ST-ZIP **MIAMI FL 33138**

1.1 TITLE **Director** ☐ Change ☒ Addition
1.2 NAME **Raymond Smatt**
1.3 STREET ADDRESS **4760 Alton Road**
1.4 CITY-ST-ZIP **Miami Beach, Florida 33140**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE **Secretary/Treasurer** ☐ Change ☒ Addition
2.2 NAME **Keith Mendez**
2.3 STREET ADDRESS **652 N.E. 77th Street**
2.4 CITY-ST-ZIP **Miami, Florida 33138**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE **President** ☒ Change ☐ Addition
3.2 NAME **Andrus, Lawrence**
3.3 STREET ADDRESS **652 N.E. 77th Street**
3.4 CITY-ST-ZIP **Miami, Florida 33138**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE **Director/Consultant** ☐ Change ☒ Addition
4.2 NAME **E.C. Smatt**
4.3 STREET ADDRESS **652 N.E. 77th Street**
4.4 CITY-ST-ZIP **Miami, Florida 33138**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 indicate I 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.

(305)

SIGNATURE:

[Signature]

Lawrence Andrus, President April 22, 1999 757-8284

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)