Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90046 037 ***150.00

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 # P98000072943

1. Corporation Name

DOWN-INE MARKETING GROUP INC

DOWNL	ME MARKETING GROOF,	MO.								
Principal Place	e of Business	Mailing Add	dress				-	11868 1841 81	161 161	
19640 WEST SAINT ANDREWS DR. 19640 WEST SAINT ANDREW				VS DR.						
MIAMI FL 33015 MIAMI FL 33015							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed			
							08/19/1998			
2. Principal Pl	ace of Business	2a. Mailing	Address				4. FEI Number	App	lied For	
21		26					65-0857030		Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certifcate of Status Desired	8.75 A		
22		27						Fee Rec		
City & State	e	— ·	City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	28 Zip		Coun	itrv		8. This corporation owes the current year Intangi			
24	25	29	[3	30					□No	
2	9. Name and Address of Curre			1			10. Name and Address of New Registered Age	nt		
	IT SI CANDO			- 1	81	Name				
	NTLEY, SANDRA			ļ.	82	Street Addres	ss (P.O. Box Number is Not Acceptable)			
19640 WEST SAINT ANDREWS DR. MIAMI FL 33015									·	
MIAS	M FL 33013			1	83					
				ļ	84	City	. 8	5 Zip C	ode	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the							FL	naina ita I	rogistored	
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida Such	change was aut	thonzed	hv t	the comoration	ration submits this statement for the purpose of cha- n's board of directors. I hereby accept the appointment	ent as reg	istered	
SIGNATURE				_ ··· ··			when reinstating) DATE		<u> </u>	
40	Signature, typed or printed name of registered age	ent and title if applicable.	. (NOTE: I	13.	agent	t signature required v	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	RS IN 12	
12.	D	4D DIRECTORS	☐ DELETE	1,1 TITL	E			Change	Addition	
NAME	BRANTLEY, SANDRA			1.2 NAM			•		1	
STREET ADDRESS	19640 WEST SAINT ANDREWS	S DR.		1.3 STR	REET	ADDRESS			}	
CITY-ST-ZIP	MIAMI FL 33015			1.4 CITY	Y-ST	-ZIP				
TITLE			DELETE	2.1 TITL	E			Change	· Addition	
NAME				2.2 NAA	ИE		•		ſ	
STREET ADDRESS				2.3 STR	REET	ADDRESS			, [
CITY-ST-ZIP				2. 4 CIT	Y-\$1	T-ZIP		1.01	-	
TITLE			☐ DELETÉ	3.1 TITL	.E] Change	Addition	
NAME				3.2 NAA						
STREET ADDRESS						ADDRESS				
CiTY-ST-ZIP			☐ DELETE	3.4. CIT		T-ZIP		Change	☐ Addition	
TITLE			☐ DECE LE	4,1 TITL			L.	Orlange		
NAME				4. 2 NA		ADDDESS				
STREET ADDRESS						ADDRESS			,	
CITY-ST-ZIP TITLE			□ DELETE	4.4 CITY 5.1 TITL		-214] Change	Addition	
NAME				5.2 NAM					_	
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				5.4 CIT		i				
TITLE			DELETE	6.1 TITL	LE] Change	☐ Addition	

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 of chapter 607, or on ap attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNÁTURE

NAME

STREET ADDRESS

CITY-ST-ZIP