2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000090574**

MARKETING MANAGEMENT SOLUTIONS, INC.

50.W

CORPORATION SERVICE COMPANY

TALLAHASSEE FL 32301-2525

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

SIPSER, KATHY

26400 GEORGE ZEIGER DRIVE

BEACHWOOD OH 44122

(See criteria on back)

Principal Place of Business

oal Place of Business

1201 HAYS STREET

水包の

ty & State MBROKK

SIGNATURE

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

NAME

NAME STREET ADDRESS

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

Mailing Address

Mailing Address

Buite, Apt. #, etc.

MBHOKE

City & State

FL

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

736 SO.W.

PINES

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

TITLE

NAME

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NAME STREET ADDRESS

TITLE NAME

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STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Country

Name

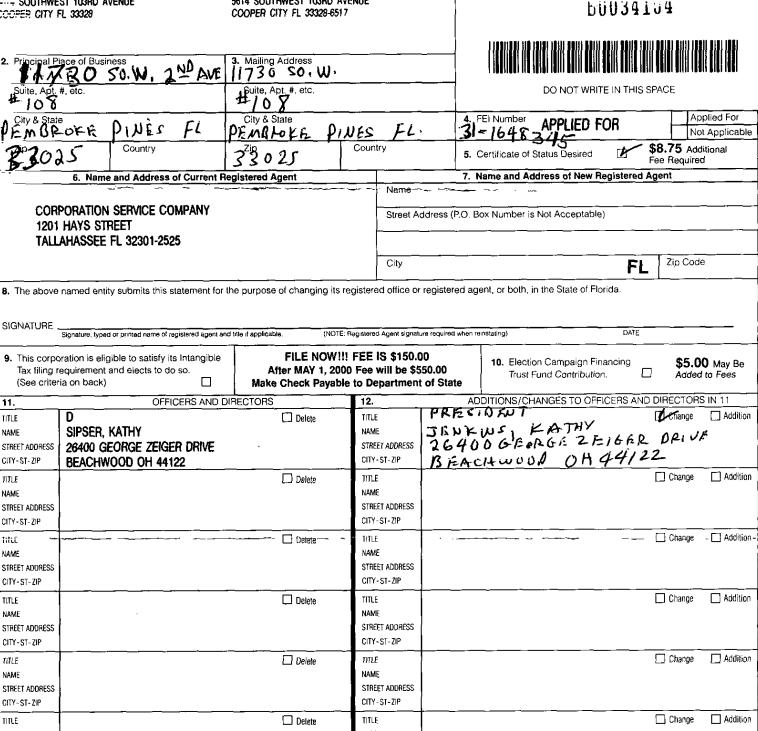
City

SOUTHWEST 103RD AVENUE COOPER CITY FL 33328

5614 SOUTHWEST 103RD AVENUE COOPER CITY FL 33328-6517

FILED Mar 06, 2000 8:00 am Secretary of State

03-06-2000 90101 047 ***158.75



CR2E034 (9/99)

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachmer

SIGNATURE: