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Amended

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
GOVERNOR
DIVISION OF CORPORATIONS

DOCUMENT # P98000097166

1. Corporation Name
ACTION SALES/MARKETING GROUP OF FLORIDA, INC.

93 APR 30 11 8:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

13510 SHADY SHORES DRIVE
TAMPA, FL 33613

SAME

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30 9. Name and Address of Current Registered Agent

WORTHLEY, GARY
13510 SHADY SHORES DRIVE
TAMPA, FL 33613

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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent or officer or director)

Name (typed or printed name of registered agent or officer or director)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
P/D ANN CREGAR WORTHLEY
13510 SHADY SHORES DRIVE
TAMPA, FL 33613

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
P/D GARY L. WORTHLEY
13510 SHADY SHORES DRIVE
TAMPA, FL 33613

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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 an officer 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 the certificate with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY WORTHLEY

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

P/D Penny Jessup
11900 S.W. 48TH ST.
COOPER CITY, FL 33330

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4/28/99 813-968-1440