2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000097521

1. Entity Name
SUCCESS MARKETERS, INC.

Principal Place of Business	Mailing Address
5040 ROBINSONG RD. SARASOTA, FL 34233	5040 ROBINSONG RD. SARASOTA, FL 34233

DO NOT WRITE IN THIS SPACE

04072008   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
65-0882644		Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BOROSKI, PATTI R
5040 ROBINSONG RD
SARASOTA, FL 34233

DO NOT WRITE IN THIS SPACE

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 _____   _____   4-7-08
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2008 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	BOROSKI, PATTI R
STREET ADDRESS	5040 ROBINSONG ROAD
CITY-ST-ZIP	SARASOTA, FL 34233

TITLE	VPD
NAME	BOROSKI, EUGENE
STREET ADDRESS	5040 ROBINSONG ROAD
CITY-ST-ZIP	SARASOTA, FL 34233

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

04/21/08-80037-020 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

PATTI R. BOROSKI

SIGNATURE: _____   4-7-08   941-921-1760
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #