2004 FOR PROFIT CORPORATION

FILED Apr 05, 2004 8:00 am

1. Early Name  CONSUMER ADVERTISING, INC.    Principal Place of Business		ANNUAL N	EPUNI (AN	1		¬"**	Connetary of Ctata	
Principal Place of Busivess 1230 S. ANDREWS AVENUE 1330 S. ANDREWS AVENUE 1330 S. ANDREWS AVENUE 1330 S. ANDREWS AVENUE 1340 S. ANDREWS AVENUE 1350 S. ANDREWS A	1 AZ ( ) THE TOTAL TOTAL TO THE TOTAL TOTA							
1290 S. ANDREWS AVENUE FORT LAUDERDALE FL 33316  2. Principal Pacco of Business  Suite. Apt. #, etc.  Suite. Address #, Ob. Bus. Number is Not Accomplished.  Suite. Address #, ob. Bus. #, etc.  Suite. App. #, etc.  Suite. Address #, ob. Bus. #, etc.  Suite. Add	CONSUMER ADVERTISING, INC.							
FORT LAUDERDALE FL 33316  2. Principal Placo of Business  3. Mailing Address  Suite. Apri. 4. etc.  Suite. April 4. etc.  Suite. April 4. etc.  Suite. April 4. etc.  Suite. April 5. Name and Address of Suite. 4 etc.  Suite. April 5. Name and Address of Suite. 4 etc.  Suite. April 6. Name and Address of Suite. 4 etc.  Suite. April 6. Name and Address of Suite. 4 etc.  Suite. April 6. Name and Address of Suite. 4 etc.  Suite. April 6. Name and Address of Suite. 4 etc.  Suite. April 6. Name and Address of Suite. 4 etc.  Suite. April 6. Name and Address of Suite. 4 etc.  Suite. April 6. Name and Address of Suite. 4 etc.  Suite. April 6. Suite. 4 etc.	Principal Place of Business Mailing Address					7		
Sulfa, Apt. 4, etc.  Cry 4, State  Cry 5, State  Country  2, Country  5, Certificate of Status Desirod  Fig. Required  Record Address of Current Registered Agant  7, Hanne and Address of Rew Registered Agant  Name  BECK, IULIA L  1230 S ANDREWS AVENUE  FORT LAUDERDALE FL 33316  Cry  FILE VOICE  Street Address (P.O. Biox Number is Not Acceptable)  Cry  FILE 20 Code  B. The above named arriby submits the statement tur the purpose of changing its registered office or registered agent, or both, in the State of Porida. I am familiary with, and accept the obligations of registered agent.  SIGNATURE  FILE NOW'!!! FEE is \$150.00  9. Election Compactor, Francing  April May 1, 2004, Fee will be \$390.00  Whish Chieck Prophysic for plorida Department of State  10.  OFFICE'S AND DIRECTORS  10.  OFFICE'S AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15.  ADDITI								
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City & State  Country  S. Certificate of Status Desired  S. Certificate of Sta	2. Principal Pl	ace of Business	3. Mailing Address					
E. Name and Address of Current Pargistered Agent  6. Name and Address of Current Pargistered Agent  7. Name and Address of New Registered Agent  Name  BECK, JULIA L  1230 S ANDREWS AVENUE FORT LAUDERDALE FL 33316  City FL Zp Code  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 Fonda. I am familiar with, and accept the obligations of registered agent.  SKINATURE  July Submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fonda. I am familiar with, and accept the obligations of registered agent.  SKINATURE  July Submits this statement for the purpose of clarifying its registered office or registered agent, or both, in the State of Fonda. I am familiar with, and accept the obligations of registered agent.  SKINATURE  July Submits this statement for the purpose of clarifying its registered office or registered agent, or both, in the State of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the obligation of the state of Fonda. I am familiar with, and accept the state of Fonda. I am familiar with, and accept the state of Fonda. I am familiar with and accept the state of Fonda. I am familiar with and accept the state of Fon	Suite, Apt. #, etc.		Suite, Apt. #, etc.					
E. Name and Address of Current Registered Agent  RECK, JULIA L 1230 S. ANDREWS AVENUE FORT LAUDERDALE FL 33316  City FL Zip Code  B. The above named entity submits the statement for the purpose of changing list registered agent, or both, in the State of Florida. I am territary with a obligations of registered agent.  SIGNATURE  After May 1, 2004 Fee will be \$359.00  After May 1, 2004 Fee will be \$359.00  FREE NOWTH: FEE IS \$150.00  OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TILE BECK, JULIA A  SITER ADDRESS  OTY-51-79  FORT LAUDERDALE FL 33316  OTH 51-79  FORT LAUDERDALE FL 33316  OTH 51-79  FORT LAUDERDALE FL 33316  OTH 51-79  FIRE OWNES  STREET ADDRESS  OTH 51-79  FIRE  Obdes  TILE  ON-S1-79  FORT LAUDERDALE FL 33316  OTH 51-79  TILE  OBdes  TILE  OBdes  TILE  OBdes  TILE  OBdes  TILE  OBDES  TILE  ORDES  TILE  ORDES  OTH 51-79  ORDES  OTH 51-79  TILE  ORDES  OTH 51-79  ORDES  OTH 51-7	City & State	8	City & State			4.	65-0916178   Not Applicable	
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BECK, JULIA L 1230 S ANDREWS AVENUE FORT LAUDERDALE FL 33316  City FL Zip Code  8. The above named entity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am lank is a with and accept the obligations or registered agent.  SKINATURE Julia State		6. Name and Address of Current	Registered Agent	SEVS AVENUE  ROALE FL 33316  A. FEI Number  A. FEI Number  A. FEI Number  G5-0916178    Applied For				
1230 S ANDREWS AVENUE   Sites And Process (FO State And Process					Name			
City FL Zip Code  8. The above named only submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE	BEC 1230	K, JULIA L O S ANDREWS AVENUE		<del></del>	Street Address	itreet Address (P.O. Box Number is Not Acceptable)		
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