2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P99000070512

Mailing Address

1. Entity Name

PROMOTRACK, INC.

Principal Place of Rusiness



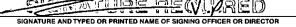
FILED Apr 21, 2003 8:00 am Secretary of State

04-21-2003 90323 047 ***150.00

3200 TAMIAMI SUITE 100 NAPLES FL 34	TRAIL NORTH	SUITE	3200 TAMIAM) TRAIL NORTH SUITE 100 NAPLES FL 34103						1 44 14 1 14 14 14 14 14 14 14 14 14 14 14 14 14		
2. Principal Place of Business		3. Mailing Address									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
City & Stat	е	City	City & State			4. F	FEI Number 59-3594793		Applied For Not Applicable		
Zip	Country Zip			Country		5. (5. Certificate of Status Desired [\$8.75 Additional Fee Required		
	d Agent			7. N	Name and Address of New Regi	stered Ag	jent	·	1		
					Name						
LOMBARDO, J. CHRISTOPHER				Street Address (P.O. Box Number is Not Acceptable)						ł	
3200 TAM	iami trail north				and the second s						
SUITE 100	1										1
NAPLES FL 34103					City			FL	Zip Code	9	1
	named entity submits this statement folions of registered agent. Signature, typed or printed name of registered agent				ed office or reg			a. I am far	nillar with, a	and accept	()
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of Stat							9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10.	OFFICERS AND	DIRECTO		11.	. 1	AD	DITIONS/CHANGES TO OFFICE				1
	LOMBARDO, J. CHRISTOPHER 3200 TAMIAMI TRAIL NORTH STI NAPLES FL 34103	☐ Delete	1	1			l	Change	☐ Addition	0/01/1001	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP 3.C. Thalheimer 2269 Queens M Naples, FL 341	Jay 12	Delete					[Change	Addition	5
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- · · ·			i i	ر عمر درجه	y1 '	. (Change	Addition	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					[Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					. [☐ Change	☐ Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE



4/15/03 239-774-4912