

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S00077

FILED
Apr 27, 2004
Secretary of State

Entity Name: PROFESSIONAL DIRECT MARKETING AND MAILING LISTS, INC.

Current Principal Place of Business:

2600 N. MILITARY TRAIL
SUITE 205
BOCA RATON, FL 334316330

New Principal Place of Business:

Current Mailing Address:

2600 N. MILITARY TRAIL
SUITE 205
BOCA RATON, FL 334316330

New Mailing Address:

FEI Number: 13-2950591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUTHERFORD MULHALL, P.A.
2600 N. MILITARY TRAIL
FOURTH FLOOR
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: KRNA, RICHARD,
Address: 4550 NW 23RD COURT
City-St-Zip: BOCA RATON, FL 33431

Title: STD () Delete
Name: KRNA, BARBARA,
Address: 4550 NW 23RD COURT
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: VERGOGLINO, JOSEPH
Address: 6635 NW 25 CT.
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: KRNA, RICHARD
Address: 4550 NW 23RD COURT
City-St-Zip: BOCA RATON, FL 33431

Title: STD (X) Change () Addition
Name: KRNA, BARBARA
Address: 4550 NW 23RD COURT
City-St-Zip: BOCA RATON, FL 33431

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA A. KRNA

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04/27/2004

Electronic Signature of Signing Officer or Director

Date