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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

S02334

(8)

1. Corporation Name MARKETING DIMENSIONS OF MIAMI. INC.



2. Principal Place of Business 1 Suite, Apt. #, etc. 2 City & State 3 City & State 3 Country 25 29 9. Name and Address of Current Registered Ager GRL, MARIE 565 NW 210ST #102 MIAMI FL 33169 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floric or registered agent, or both, in the State of Florida Such change with and accept the obligations of Section 607.0505, Floric SIGNATURE Signature typed or printed name of registered agent and titriil application. SIGNATURE Signature typed or printed name of registered agent and titriil application. OFFICENS AND DIRECTORS	#, etc.	Country		3. Date incorporated or Qualified 09/17/1990 4. FEI Number 65-0261073 5. Certilicate of Status Desired 6. Election Campaign Financing Trust Fund Contribution	3a. Date o	\$8.75	Applied For Not Applicable Additional
Suite, Apt. #, etc. City & State City & State Zip Country Z5 28 Zip Country Z5 29 9. Name and Address of Current Registered Ager GILL, MARIE 565 NW 210ST #102 MIAMI FL 33169 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florid Country to registered agent, or both, in the State of Floridal Suich change we familiar with, and accept the obligations of Section 607,0505, Florid SIGNATURE Stylation bysed or protod name of registered a port and title application. OFFICE RS AND DIRECTORS	30			Certificate of Status Desired Election Campaign Financing Trust Fund Contribution		\$8.75	
Suite, Apt. #, etc. City & State City & State City & State Zip Country Zip 25 3. Name and Address of Current Registered Ager GALL, MARIE 585 NW 210ST #102 MIAMI FL 33169 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florer registered agent, or both, in the State of Floridal Suich change we familiar with, and accept the obligations of Section 607.0505, Florid SIGNATURE Signature typed or probled name of registered agent and table it application. OFFICE HIS AND DIRECTORS	30		(Election Campaign Financing Trust Fund Contribution			
City & State City & State 28 Zip	30		(Trust Fund Contribution			Required
Zip Country Zip 25 29 9. Name and Address of Current Registered Ager GHLI, MARIE 585 NW 210ST \$\rightarrow\$102 MIAMI FL 33169 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floor registered agent, or both, in the State of Florida Such change with amiliar with, and accept the obligations of Section 607.0505, Florid SIGNATURE Signature speed or period name of registered agent and the state of Florida. OFFICERS AND DIRECTORS	30		·	Trust Fund Contribution		\$5.00	May Be
Zip Zip Zip Zip Zip Zip Zip Zip	30		/		L)	Added to Fees	
9. Name and Address of Current Registered Ager GALL MARIE 565 NW 210ST \$102 MIAMI FL 33169 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floring or registered agent, or both, in the State of Floridal Such change with amiliar with, and accept the obligations of Section 607.0505, Florid SIGNATURE Signature typed or problem on registerial and the little of publication. OFFICERS AND DIRECTORS				8. This corporation has liability for i	intangible tax	under s	199.032,
9. Name and Address of Current Registered Ager GRL, MARIE 565 NW 210ST #102 MIAMI FL 33169 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Flor or registered agent, or both, in the State of Floridal Such change withmiliar with, and accept the obligations of Section 607.0505, Florid SIGNATURE Stylatine typed or period name of registered agent and their application. OFFICERS AND DIRECTORS	1 t			Florida Stalutes	No.		
565 NW 210ST 102 103 104 105 105 106 107 107 108 108 109 109 109 109 109 109			T	10. Name and Address of New R	tegistered A	gent	
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Pursuant to the provisions of Sections 607.0502 and 607.1508, Floor registered agent, or both, in the State of Florida. Such change we familiar with, and accept the obligations of Section 607.0505, Florids		63	'				
or registered agent, or both, in the state of Florida Situation of Section 607.0505, Floridamiliar with, and accept the obligations of Section 607.0505, FloridamATURE Signature typed or period name of registers a period of the language of Section 607.0505.		84	City		FI	85 Zg	ρ Code
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Foo nereby certify that the information supplies with this simple with this simple and does not qualify to the execute this simple and an 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 cath, that I am an officer or directory of the corporation or the receiver pri trustee enipowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 12 or Block 12 or or an attachment with an address

SIGNATURE