

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**DOCUMENT # S39173 (7)**

**95 MAR 14 AM 8:04**

1. Corporation Name  
**ITC MARKETING, INC.**

Principal Place of Business Mailing Address  
**3124 N.W. 18TH TERR MIAMI FL 33125** **3124 N.W. 18TH TERR MIAMI FL 33125**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>03/20/1991</b>	3a. Date of Last Report <b>05/24/1994</b>
4. FEI Number <b>65-0291131</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 State, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent <b>GONZALEZ, ADOLFO 3124 NW 18 TERR SUITE 301 MIAMI FL 33125</b>	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (Signature) \_\_\_\_\_ (Registered Agent Signature) \_\_\_\_\_ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>D</b>	NAME <b>GONZALEZ, ADOLFO H.</b>	1. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS <b>3124 N.W. 18TH TERR</b>		2. NAME	
CITY, ST, ZIP <b>MIAMI FL</b>		3. STREET ADDRESS	
		4. CITY - ST - ZIP	
		5. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
		6. NAME	
		7. STREET ADDRESS	
		8. CITY - ST - ZIP	
		9. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
		10. NAME	
		11. STREET ADDRESS	
		12. CITY - ST - ZIP	
		13. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
		14. NAME	
		15. STREET ADDRESS	
		16. CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information reflected 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 oath. 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 on Block 12 or Block 13 if checked, or as an attachment with an address.

SIGNATURE: **3-15-95** (305) 634-8858  
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD MEMBER OR DIRECTOR