FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **S45349**1. Corporation Name

GAMEFISH MARKETING, INC.

Feb 10, 1999 8:00 am Secretary of State

02-10-1999 90025 042 ***150.00



Principal Place	of Business	Mailing Address			(1981)015 111 61001 01100 1111 01210 1211	,,, g,,,, g,,,,, e,e,, e,.,	-,, <u>-</u> ,,
1170 A-1-A		1170 A-1-A					•
SUITE 204		SUITE 204		DO NOT WRITE IN THIS SPACE			
HILLSBORO FL 33062		HILLSBORO FL 33062		3. Date Incorporated or Qualified			
					04/15/1991		
2 Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	App	lied For
	ace of Busiliess	26			65-0263371	· Not	Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	I
22		27				Fee Rec	
City & State	9	City & State			6. Election Campaign Financing	\$5.00 to Added to	, I
23		28	Country		Trust Fund Contribution		
Zip			30		8. This corporation owes the current year Intangible Personal Property Tax.		
24	9. Name and Address of Curre	1-0	301		10. Name and Address of New Register	ed Agent	
	9. Name and Address of Curre	ant registered Agone	81	Name			
WER	KING, RALEIGH		82	Ctroot Add	tress (P.O. Box Number is Not Acceptable)		
1170 A-1-A, SUITE 204			02	Sileer Add	ass (F.O. Box Number is Not Acceptable)		
HILLS	SBORO FL 33062		83	1			
			84	City		85 Zip C	ode
-					The state of the s	of changing its	registered
					poration submits this statement for the purposition's board of directors. I hereby accept the a	opointment as reg	gistered
office or read agent. La	egistered agent, or both, in the Statem familiar with, and accept the obli-	gations of, Section 607.0505, Flor	ida Statute	S.			l
SIGNATURE	Signature, typed or printed name of registered a	ALOTTO:	Desirtared Age	ent eignature requir	DATE DATE		_
,	Sloveture, typed or printed name of registered a						
40		*		in signature requi	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
12.	OFFICERS /	AND DIRECTORS DELETE	13.	in signature requi	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	OFFICERS /	AND DIRECTORS	13.			AND DIRECTO	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR