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

**PROFIT** CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S54685

CENTRAL MARKETING SYSTEMS, INC.

(0)

## **FILED** Mar 06 1997 8:00am Secretary of State

Poncipal Plac 100 INDIAN HA SUITE #506 PONTE VEDRA		SUITE 506	100 INDIAN HAMMOCK LN						
US		US		3. Date Incorporated or Qualified 05/21/1991	1/1991 03/04/1996				
keen in	face of Business	2a. Mailing Address			4. FEI Number		· · · · · · · · · · · · · · · · · · ·	oplied For	
Suite, Apt	#. éta	Suite, Apt. #, etc.			59-3069878			ot Applicable Additional	
22	7 ( 500	27			5. Certificate of Status Desired		بر و. روم. Fee Re		
City & Star	· · · · · · · · · · · · · · · · · · ·	City & State	····		6. Election Campaign Financing		\$5.00	May Be	
23	1	28	1		Trust Fund Contribution		Added	to Fees	
- Ζφ (T.)	Country	Zip	Countr	у	8. This corporation has liability for i			. 199.032,	
24	25] 9. Name and Address of Cu	29  rrent Registered Agent	30		Florida Statutes  10. Name and Address of New Re	Yes			
MUS	RPHY, RICHARD		81	Name	10. 110/110 4114 /144/1005 01 110/1110	Biorolon LA			
	INDIAN HAMMOCK LN	•	82 Street A		ddress (P.O. Box Number is Not Acceptab	lo)			
	ITE VEDRA BEACH FL 32082		0.	Suber ru	sareas (i .o. box radilide) is not Acceptab				
			83	}					
			84	City		I	<b>85</b> Zip i	Code	
				1	orporation submits this statement for the p	FL			
agent i a SIGNATURE <b>)</b>	Easter Sander on or three of expelens	bligations of, Section 607.0505, FI			Augured when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE CERS AND D	BECTOE	RS IN 12	
10.6	D	OFLETE	1.1 Title				Change	Addition	
NAME	MURPHY, RICHARD		1.2 NAME						
STREET ADDRESS	100 INDIAN HAMMOCK LN		1.3 STREE	T ALIDRESS					
CITY ST 70P	PONTE VEDRA BEAHC FL		1.4 CITY-	ST-ZIP	***************************************			·····	
101.1	: :	L.) DELETE	2.1 TITLE			L.,	J Change	Addition	
NAME STREET ADDRESS			2.2 NAME	T ADDRESS					
CHY SI ZIP			2.4 CITY-						
TIPLE		DELETE	3.1 TITLE	31 24			Change	Addition	
NAM:			3.2 NAME						
STREET ADDRESS.			3.3 STREE	T ADDRESS					
COTY - \$1 - 70°		05.555	3.4 CITY-	ST-ZIP		·····			
10.f		☐ DELETE	4.1 3(TLE			L.	J Change	Addition	
NAME ROBEL Monors			4. 2 NAME	ľ					
SOREEL ACCIE: SN COLY ST-7IP			4.3 STREE 4.4 CHTY-	T ADDRESS					
THEF		DELETE	5.1 TITLE	21-511		Т	Change	Addition	
NAME			5.2 NAME			_			
STREET ADDRESS			5.3 STREE	T ADDRESS					
CHY-\$1-200			5.4 CITY-	ST-ZIP					
TILLE		☐ DELETE	6.1 1/TLE				Change	Addition	
NAM:			6.2 NAME	1					
SIREFF 45(0FF5.)				T ADDRESS					
14. I do herel	l by cerbfy that the information sup	plied with this filing does not quali	6.4 CITY-	emption sta	ited in Section 119.07(3)(i), Florida Statute	s I further co	ertify thet	the	
informatic	on indicated on this annua' report	or suppremental annual report is t	true and acc	curate and th	hat my signature shall have the same lega port as required by Chapter 607, Florida S	Leffect as if	made un	der oath: that	