

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90031 038 ***150.00

DOCUMENT # S75301

1. Corporation Name

MARKETEL INCORPORATED

Principal Place of Business

2806 MOSS GROVE BLVD
SUITE E
ORLANDO FL 32807-6420
US

Mailing Address

2806 MOSS GROVE BLVD
ORLANDO FL 32807
US

2. Principal Place of Business

21 4410 N. LANDMARK DR.

Suite, Apt. #, etc.

22

City & State

23 ORLANDO FL

Zip

24 32817

Country

25 US

2a. Mailing Address

26 4410 N. LANDMARK DR.

Suite, Apt. #, etc.

27

City & State

28 ORLANDO FL

Zip

29 32817

Country

30 US

9. Name and Address of Current Registered Agent

D'ASSARO, VINCENT M.
20 NORTH ORANGE AVENUE
SUITE 1107
ORLANDO FL 32801

3. Date Incorporated or Qualified

08/23/1991

4. FEI Number

59-3132073

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME FEINER, S. MARK
STREET ADDRESS 2806 MOSS GROVE
CITY-ST-ZIP ORLANDO FL

TITLE D ☐ DELETE

NAME FEINER, CAROL R.
STREET ADDRESS 2806 MOSS GROVE
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 4410 N. LANDMARK DR.
1.4 CITY-ST-ZIP ORLANDO FL 32817

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 4410 N. LANDMARK DR.
2.4 CITY-ST-ZIP ORLANDO FL 32817

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/99

Date

407-657-2487

Daytime Phone #

0104528

CR2E034 (1/1/98)