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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V07037

(7)

SIGNATURE:

	MARKETING, INC.	Mailing Address				
Principal Place of Business 203 S. LINCOLN AVE TAMPA FL 33609		P.O. BOX 18243 TAMPA FL 33679-8243				
					3. Date Incorporated or Qualified 01/15/1992	3a. Date of Last Report 08/21/1996
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
St. te, Apt # et:		Suite, Apt. #, etc.		59-3115482	Not Applicable \$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State 23 TAMPA FL		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip [24] 33 <i>6</i>	Country 25	Zip 29	Country 30	y	Florida Statutes	or intangible tax under s. 199.032, ☑ Yes ☐ No
	9. Name and Address of Currer	t Registered Agent	81	Name	10. Name and Address of New	Registered Agent
LANDIS, ROBERT E. 203 S. LINCOLN AVENUE						
#200			82	Street A	Address (P.O. Box Number is Not Accept	table)
	PA FL 33603		83			
			84	City		85 Zip Code
11 Possioni	to the braidstres of Sections 607.056	2 and 607 1508. Fiorida Statute	s the abov	e-named	corporation submits this statement for the	FL 5 2.10 Gode
office or n	egistered agent, or both, in the State im familiar with, and accept the oblig	of Florida, Such change was au ations of Section 607 0505. Flor	ithorized b	y the corp	corporation submits this statement for the oration's board of directors. I hereby acc	
SIGNATURE	ROBERT E LAI	udis Presid	ENT			3/21/97
12.	Separate by exportated trial of registered ap-		Registered Ag	ent signature	required when reinstaling) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12
lillé	P	DELETE	1.1 TITLE			Change Addition
NAME	Robert E. Landis		1.2 NAME		MARTINE L. LANDIS	æ
STREET ADORESS	203 S. LINCOLN AVENUE			T ADDRESS	203 S. LINCOLN AV	u .
011Y-51-741 1 104	TAMPA FL.	DELETE	1.4 CrTY - 2.1 Title	ST-ZIP	TAMPA , FL 33609	Change Addition
NAM!			2.2 NAME			
SPECIA (DRISS			2.3 STREE	T ADDRESS		
CH1Y-51-71		DECET	2 4 CiTY-	ST-7IP		Change Mddian
1111		☐ DELETE	3 1 TIFLE 32 NAME			Change Addition
NAME STREET ACCRESS				T ADDRESS		
Ony St. 7a			3.4. C/TY-	1		
HILE		☐ DELETE	4 1 THILE			Change Addition
NAME			4. 2 NAME			
SHILLY ADDRES				T ADDRESS		
D10F		☐ DELETE	4.4 CITY- 5.1 TITLE	SI-ZIP		☐ Change ☐ Addition
RAM!			5.2 NAME			
\$1000 \$1000 \$5			5.3 STREE	T ADDRESS		
CL Y 51-7P			5.4 CITY-	ST-ZIP		T Ohanaa T 1999
TELSE FORM	:		6.2 NAME			Change Addition
SPRET ADDRESS	:			T ADORESS		
CHY SI 769			6 4 CITY-			
14. Edo herel	1					
poformula.	I	d with this filing does not qualify	for the ex	emption st	ated in Section 119.07(3)(i), Florida State that my signature shall have the same to	utes. I further certify that the

MARTINE L. LANDIS 3/22/97 254-4248