2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V42706

FILED Jan 11, 2005 Secretary of State

Entity Name: MARKETMAKERS, INC.	
Current Principal Place of Business:	New Principal Place of Business:
9440 N W 12TH STREET MIAMI, FL 33172 US	
Current Mailing Address:	New Mailing Address:
9440 N W 12TH STREET MIAMI, FL 33172 US	P.O. BOX 526123 MIAMI, FL 33152 US
FEI Number: 65-0379296 FEI Number Applied For () FEI Num	nber Not Applicable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
NOVITSKI, JOSEPH 5891 SW 81 STREET MIAMI, FL 33143 US	
The above named entity submits this statement for the purpose of in the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title: PVD () Delete Title: (X) Change () Addition NOVITSKI, JOSEPH NOVITSKI, JOSEPH Name: Name: 5891 SW 81 ST Address: P.O. BOX 526123 Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: MIAMI, FL 33152

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change () Addition}$

 Name:
 CASSIDYI, BRIAN J
 Name:
 CASSIDY, ANN CHB

 Address:
 3680 N W 73RD STREET
 Address:
 3680 N W 73RD STREET

 City-St-Zip:
 MIAMI, FL 33147
 City-St-Zip:
 MIAMI, FL 33147

Title: () Delete Title: STD () Change (X) Addition

 Name:
 Name:
 NOVITSKI, PAULA C

 Address:
 Address:
 P.O. BOX 526123

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33152 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH NOVITSKI P 01/11/2005