

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000071852

**Entity Name:** LEGACY MARKETING SYSTEMS INC.

**Current Principal Place of Business:**

6800 SW 40 STREET  
#105  
MIAMI, FL 33155

**FILED**  
**Apr 22, 2015**  
**Secretary of State**  
**CC5992352586**

**Current Mailing Address:**

6800 SW 40 STREET  
#105  
MIAMI, FL 33155 US

**FEI Number: 46-3528061**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FOLEY, DEREK J  
15270 SW 10 STREET  
MIAMI, FL 33194 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	P	Title	S
Name	FOLEY, WILLIAM J	Name	FOLEY, DEREK J
Address	6800 SW 40 STREET #105	Address	15270 SW 10 STREET
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	MIAMI FL 33194

*I hereby 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 all other like empowered.*

**SIGNATURE: WILLIAM FOLEY**

**PRES**

**04/22/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date