FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Sep 03, 2002 8:00 am Secretary of State **DOCUMENT #** K96866 1. Entity Name A & B MARKETING, INC. 09-03-2002 90124 018 ***150.00 Principal Place of Business Mailing Address 9450 PHILLIPS HWY 9450 PHILLIPS HWY JACKSONVILLE FL 32256 JACKSONVILLE FL 32256 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2947900 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KECK, MICHAEL E. Street Address (P.O. Box Number is Not Acceptable) 9450 PHILLIPS HWY STE 1 JACKSONVILLE FL 32256 City Zip Code pose of changing its registered office or registered agent, or both, in the State of Florida 8128/02 SIGNA printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete Change ☐ Addition KECK, MICHAEL E. NAME 8545 HUNTERS CREEK DRIVE STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling indicated on this report or supplemental report is true and of the corporation or the receiver or truttee empowered be changed, or on an attachment with an address, who all puts. does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

E OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

8/28/02 904-268-0033 Date Daytime Phone #

A & B Marketing, Inc

Distributor of

9450 Philips Hwy Suite 1 Jacksonville, Florida 32256 (904) 268-0033



08/28/02

Uniform Business Report Division Of Corporations P O Box 1500 Tallahassee, FL. 32302-1500

To Whom It May Concern

During the last month, I was named the new Controller of A & B Marketing, a Florida corporation. One of my expertise deals with the requirements of states taxes. The person that I replaced was neither qualified or experienced with the requirements of filing and processing of state taxes. Also, the person had a medical issue that did not allow them to fully grasp the enormous responsibility of running a financial department.

While I fully understand the company did not meet the appropriate deadlines for the filing of the Uniform Business Report, I am requesting that the State Of Florida waives the late fee of \$400.00 because of the situation that was described above. I truly believe your department will be satisfied that I, a qualified and experienced Controller, will now be in charge of this area.

To conclude, since I have taken this position, I have worked very hard in reconciling our department. It would be a great service, if your department would except our check and remove the late charge. Thank You.

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Anthony A. Rosimini

Controller