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**

DOCUMENT # L73200 1. Corporation Name

MILITARY DIRECT MARKETING INC.

Principal	Place	of	Business	

SIGNATURE

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90022 040 ***150.00



Principal Place	of Business	Mailing Address				
11410 NORTH KENDALL DRIVE 1 BUSHWICK ROAD						
MIAMI FL 33176			POUGHKEEPSIE NY 12603-3800			DO NOT WRITE IN THIS SPACE
		US				3. Date Incorporated or Qualifed
		1 2- 14-11 4 44				05/16/1990 4. FEI Number Applied For
<u> </u>	ace of Business	2a. Mailing Addre	ess			
21		26				65-0220038 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.			5. Certifcate of Status Desired \$8.75 Additional Fee Required
22	<u></u>	27				
City & State	•	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	c	ountry	,	This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax.
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent
				81	Name	
	DBURY, DOUGLAS			82	Street A	Address (P.O. Box Number is Not Acceptable)
1141	0 NORTH KENDALL DRIVE			"	Ollocia	addisos (i .o. pox ridinos is not respective)
MLAM	II FL 33176			83		
				oxdot		
				84	City	FL 85 Zip Code
44.5		2 CO7 1EAR Florid	do Ctatutos, the		o named a	corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State	of Florida, Such chan-	ge was authoriz	ed by	the corpo	ration's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0	5505, Florida Si	atutes	i	į.
SIGNATURE			MOTE: Basista		al constant	quired when reinstating) DATE
12.	Signature, typed or printed name of registered ager	ID DIRECTORS		3.	iii signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
				TITLE		Change Addition
TIFLE	P COURT TOTAL			NAME		_ , _ ,
NAME	BRADBURY, JOHN					,
STREET ADDRESS	1 BUSHWIDE RD.				T ADDRESS	
CITY-ST-ZIP	POUGHKEEPSIE NY			CITY-S	T-ZIP	☐ Change ☐ Addition
TITLE		ان لــا	LETE 2.	TITLE		Elange - Addition
NAME			2.2	NAME		·
STREET ADDRESS	:		2.3	STREE	TADDRESS	}
CITY-ST-ZIP			2.	4 CITY-S	ST-ZIP	
ΠΠLE		□ Di	LETE 3.	TILE		☐ Change ☐ Addition
NAME			3.2	NAME		
STREET ADDRESS			3.3	STREE	TADDRESS	j
CITY-ST-ZIP				. CITY-S		
TITLE				TITLE		Change Addition
NAME				2 NAME	-	
					T ADDRESS	
STREET ADDRESS		,			- 1	
CITY-ST-ZIP				CITY-S	1-219	☐ Change ☐ Addition
TITLE				TITLE		
NAME				NAME		
STREET ADDRESS					TADDRESS	\ \frac{1}{2}
CITY-ST-ZIP				CITY-S	T-ZIP	
TITLE		<u> </u>		TITLE		☐ Change ☐ Addition
NAME			6.3	NAME	1	
STREET ADDRESS			6.3	STREE	TADORESS	
CITY-ST-ZIP			6.4	CITY-S	T-ZIP	
On I-VI-EE					1	

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.