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 # G88319 1. Corporation Name

VENUE ADVERTISING, INC.

	,				i	1				
Principal Place	e of Business	Mailing Address				· 1	LOUTING MUNICIPALITY (MINISTRALITY)	11818 1811 81817 1	/1 5 11 3 (81) 8181	Blått åtätt tabi
945 W 15TH STREET 945 W 15TH STREET RIVIERA BCH. FL 33404 RIVIERA BCH. FL 33404							DO NOT W	RITE IN THIS	SPACE	
	,						ncorporated or Qualife	d		
2. Principal P	lace of Business	2a. Mailing Address		-		4. FEI N				pplied For
21		26				<u>59-2</u> !	<u>501788 </u>			ot Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certifo	ate of Status Desired		Fee R	Additional lequired
City & Stat		City & State				Trust I	on Campaign Financing Fund Contribution	- U	Added	May Be to Fees
Zip	Country	Zip	Country	/			orporation owes the cu	urrent year In	tangible Yes	XINo I
24	9. Name and Address of Current	29 30	<u> </u>				nal Property Tax. and Address of New	Registered		Z
	9. Name and Address of Current	Registered Agent	81	Name	-		BRUCATE		71goilt	
LAFF	FLER, RALPH H.					VDA	-		 	
8801 RIVERFRONT TERR., S.E.			82	Street	Address	(P.O. Bo)	X Number is Not Accep	TRL.		
TEQ	UESTA FL 33469		83		7,12					
				Cit					95 7in	Code
	•		84			PITI		FL		Code 478
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named	corporat	ion subm	its this statement for the	ne purpose of	changing its	s registered
office or r agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of the finite state of the f	ions of, Section 607.0505, Florid	a Statute:	s.	UI ZUUII S	board or	directors, rifereby acc	/		bg.o.c.rou
SIGNATURE	Mula Mu	Cato, LINDAI	3 <i>1</i> 940	170	1.3	7		4/28	199	
	Signature typed or printed name of registered agent			nt signature r	required whe		ONS/CHANGES TO C	DATE	UD DIBECT	ODS IN 12
12 . πτιε	OFFICERS ANI	D DIRECTORS DELETE	13.	-	1	ADDITI	UNS/CHANGES TO C	JEFICERS A	☐ Change	
NAME	LAFFLER, RALPH H.	1.2 N ^A								
STREET ADDRESS	8801 RIVERFRONT TERR., S.E.			T ADDRESS		•				
CITY-ST-ZIP	TEQUESTA FL 33469		1.4 CITY-5	ST-ZIP						
TITLE	D	DELETE 2.1 TI							☐ Change	☐ Addition
NAME	BUTLER, ROGER S.	R, ROGER S. 222N								
STREET ADDRESS	6 EMARITA WAY		2.3 STREE	T ADDRESS			•			
CITY-ST-ZIP	STUART FL		2. 4 CITY-	ST-ZIP						
TITLE	PD	☐ DELETE	3.1 TITLE		CE	OD			Change	☐ Addition
NAME	- ALBANESE, MICHAEL		3.2 NAME					-		- · -
STREET ADDRESS	712 NIGHTHAWK WAY			TADDRESS						
CITY-ST-ZIP	NORTH PALM BEACH FL	☐ DELETE	3.4. CITY-	ST-ZIP	0.5		17.		Change	Addition
TITLE	VPD TAMPA	□ ĐELETE	4.1 TITLE 4. 2 NAME		PI)			A Shoringe	
NAME	FITZGERALD, TAMRA 119 GULFSTREAM RD.		1	TADDRESS						
STREET ADDRESS	NORTH PALM BEACH FL		4.3 STREE							
CITY-ST-ZIP TITLE	D D	⊠ DELETE	4.4 CITY-	DI-ZIP	 				☐ Change	Addition
NAME .	LAFFLER, BERNICE C	<u></u>	5.2 NAME							
STREET ADDRESS	150 GREEN POINT CIR		5.3 STREE	T ADDRESS			,			:
CITY-ST-ZIP	PALM BEACH GARDENS FL		5.4 CITY-	ST-ZIP				•		
TITLE	STD	☐ DELETE	6.1 TITLE	A 41,00					☐ Change	Addition
NAME	LINDA BRUCATO		6.2 NAME							, .
1			.		1					,

JUPITER 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 appeaddress, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS 9795 MOCKINGBIRD TEL

33478

May 04, 1999 8:00 am Secretary of State

05-04-1999 90094 014 ***150.00