## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

DAVID ADVERTISING, INC. Principal Place of Business Mailing Address THE LEADER BLDG. THE LEADER BLDG. 526 SUPERIOR AVE E STE 300 526 SUPERIOR AVE E STE 300 DO NOT WRITE IN THIS SPACE **CLEVELAND OH 44114-1983 CLEVELAND OH 44114-1983** 3. Date Incorporated or Qualified 02/25/1988 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 34-1216202 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes or has paid the current year Intarbible Personal Property Tax due June 30. Yes Young Zip 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SCHNECK, PENNY 580 VILLAGE BOULEVARD Street Address (P.O. Box Number is Not Acceptable) SUITE 280 83 **WEST PALM BEACH FL 33409** 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutos. SIGNATURE Signature, typed or printed name of registered age it as dittle if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE SCHAUL, LOUIS R. NAME 1.2 NAME 1610 OAKWOOD DR STREET ADDRESS 1.3 STREET ADORESS **CLEVELAND OH** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change ■ Addition 2.1 TITLE TITLE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY- ST - ZIP CITY-ST-ZIP Addition DELETE 31 TITLE ☐ Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition | 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition Change TITLE 51 TITLE NAME 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 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 armual 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 he receiver of 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 if an attaching it with an address.

4-30-98

FILED

May 19 1998 8:00am

Secretary of State