

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S60410 (5)
1. Corporation Name
INTERACTIVE EDGE, INC.



Principal Place of Business
**2040 SHERMAN STREET
HOLLYWOOD FL 33020**

Mailing Address
**2040 SHERMAN STREET
HOLLYWOOD FL 33020**

3. Date Incorporated or Qualified
06/17/1991

3a. Date of Last Report
03/23/1995

4. FEI Number
65-0272304

5. Certificate of Status Desired ☐ **\$8.75 Additional Fees Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 **1111 Lincoln Road**
Suite, Apt. #, etc.
22
City & State
23 **Miami Beach FL**
Zip
24 **33139** Country
25 **U.S.A.**

2a. Mailing Address
26 **1111 Lincoln Road**
Suite, Apt. #, etc.
27
City & State
28 **Miami Beach FL**
Zip
29 **33139** Country
30 **U.S.A.**

**UNITED CORPORATE SERVICES, INC.
801 NORTHEAST 167TH STREET
SUITE 300
NORTH MIAMI BEACH FL 33162**

9. Name and Address of Current Registered Agent
**UNITED CORPORATE SERVICES, INC.
801 NORTHEAST 167TH STREET
SUITE 300
NORTH MIAMI BEACH FL 33162**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 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 Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	ORSBURN, MICHAEL L.	2040 SHERMAN STREET HOLLYWOOD FL		<input checked="" type="checkbox"/>
D	ORSBURN, CHRISTINE	2040 SHERMAN ST. HOLLYWOOD FL		<input checked="" type="checkbox"/>
VP	REA, STEVEN C.	2040 SHERMAN ST. HOLLYWOOD FL		<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
Chairman of the Board	Marty Irwin	1111 Lincoln Road Miami Beach, FL 33139		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Executive V.P. and CFO	Kenneth D. Corber	1111 Lincoln Road Miami Beach, FL 33139		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Executive V.P. and CFO	Jeffrey J. Kaplan	545 Fifth Avenue NY NY 10017		<input type="checkbox"/>	<input checked="" type="checkbox"/>
VP, Treasurer and Secretary	Gary R. Strack	545 Fifth Ave NY NY 10017		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Assistant Secretary	Jill Cohen	1111 Lincoln Road Miami Beach, FL 33139		<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96 (212) 907-1235

CR2E034 (12/95)