

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

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M42939**
1. Corporation Name
SELECTA MAGAZINE, INC
1717 N. BAYSHORE DR #1432
MIAMI FLA 33132-1151

Principal Place of Business

Mailing Address

SAME

SAME

2. Principal Place of Business 21 1717 N. BAYSHORE DR Suite, Apt. #, etc. 22 SUITE 113 City & State 23 MIAMI FLA Zip 24 33132	2a. Mailing Address 25 1717 N. BAYSHORE DR Suite, Apt. #, etc. 27 SUITE 113 City & State 28 MIAMI FLA Zip 29 33132	3. Date Incorporated or Qualified 12-9-86	3a. Date of Last Report 4-8-95	4. FEI Number 59-2263306	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required		
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees		
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAST, Lillian
10030 SW 40ST. #A
MIAMI FLA 33165

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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRES. SEC & DIR. <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUINES, NORA	1.2 NAME	
STREET ADDRESS	1717 N. BAYSHORE DR #1432	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FLA	1.4 CITY-ST-ZIP	
TITLE	VICE PRES. DIR. TREAS. <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, AVELINA	2.2 NAME	
STREET ADDRESS	1717 N. BAYSHORE DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FLA	2.4 CITY-ST-ZIP	
TITLE	TREASURER <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUINES, MICHAEL	3.2 NAME	
STREET ADDRESS	1717 N. BAYSHORE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FLA 33132	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: **Vice Pres** **4-25-96** **305-579-0979**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)