SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000056861 (5)**

1. Corporation Name

PROMOVES S.M.G., INC.

Principal Place of Business	Mailing Address
% HERZFELD & RUBIN 801 BRICKELL AVE SUITE 1501 MIAMI FL 33131	% HERZFELD & RUBIN 801 BRICKELL AVE SUITE 1501 MIAMI FL 33131

3. Date Incorporated or Qualified: **08/01/1994**
3a. Date of Last Report: **10/12/1995**

4. FEI Number: 65-0511581 ☐ Applied for ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee 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	2a. Mailing Address
21 N/A - No Change	26 N/A - No Change
22 Suite, Apt. #, etc: N/A	27 Suite, Apt. #, etc: N/A
23 City & State: N/A	28 City & State: N/A
24 Zip: N/A; 25 Country: N/A	29 Zip: N/A; 30 Country: N/A

9. Name and Address of Current Registered Agent

WILLNER, ROBIN I ESQ
HERZFELD & RUBIN
801 BRICKELL AVE SUITE 1501
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: N/A - No Change
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: N/A (Signature of new registered agent, if appointed) (Title) (Date)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOZOFF, MICHAEL D HERZFELD & RUBIN 801 BRICKELL AVE # 1501 MIAMI FL 33131	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHAPIRO, JEFFREY HERZFELD & RUBIN 801 BRICKELL AVE # 1501 MIAMI FL 33131	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHAPIRO, MYRON HERZFELD & RUBIN 801 BRICKELL AVE # 1501 MIAMI FL 33131	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FIGUEREDO, LUIS HERZFELD & RUBIN 801 BRICKELL AVE # 1501 MIAMI FL 33131	☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCDUFFIE, BRIAN HERZFELD & RUBIN 801 BRICKELL AVE # 1501 MIAMI FL 33131	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (3/96)

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Brian K. McDuffie — 7/30/96 — (305)381-7999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone Number)

0040704 CP