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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000035529 (3)

MIDLAND CONSUMER RADIO, INC.

Principal Place of Business Mailing Address 1870 N. TOPPING AVE. 1670 N. TOPPING AVE. KANSAS CITY MO 64120 KANSAS CITY MO 64120-1224 Date Incorporated or Qualified 3a. Date of Last Report 05/05/1995 03/20/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0590856 Not Applicable Suite, Apt. #, etc. Surto, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country B. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ATRIUM REGISTERED AGENTS, INC 1500 SAN REMO AVENUE, SUITE 125 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33146 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules. SIGNATURE Signature, typed or printed name of registered agent and tipe if applicable (NOTE: Registered Agent signature required when reinstalling) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Senior Vice President John Chass TITLE DPS DETETE 13 11111 Change Addition NAME SHAMMAH, BARUCH 12 NAME 1500 SAN REMO AVE., #125 1670 North Topping Ave. STREET ADORESS 1.3 STREET ADDRESS **CORAL GABLES FL 33146** Kansas City, MO. 64120 CITY-ST-ZIP 1.4 CHTY+S1+ZrP DELFTE TITLE 211111 Director of Finance & Asst. Change Eric Schenck Se 1670 North Topping Ave. NAME 2.2 NAME Secretary STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP Kansas City, MO. 64120 2 # CITY - ST - 7IP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAM3 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE TITLE 41 TITLE Change Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$T - 7IP DELETE TITLE 5.1 117(F Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY+S1-7IP DELETE TITLE 61 DHUE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-\$1-7IP

14. I do 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 faint at report or supplemental airmual 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 reporter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if manguely on arguitachment with an address.