2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 06, 2000 8:00 am **DOCUMENT # 218865** 1. Entity Name Secretary of State SARASOTA BROADCASTING COMPANY -03-06-2000 90006 018 \*\*\*150.00 Principal Place of Business Mailing Address ANTONIO G FERNANDEZ ANTONIO G FERNANDEZ 2500 TENTH ST 2500 TENTH ST 60031733 SARASOTA FL 34237-3506 **SARASOTA FLA 34237-3506** 3. Mailing Address
2959 Dosoto Rd 2. Principal Place of Business 2959 DESOTORO DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FE! Number 59-0897592 SARASOTA ARASOTA Not Applicable Country O.S.A Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FERNANDEZ,A G DESOTO Reptable) 2500 10TH ST SARASOTA FL 34237 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Delete TITLE TITLE FERNANDEZ.A G NAME NAME 2959 20, ESOTO, Rd STREET ADDRESS 2500 TENTH ST. STREET ADDRESS SAMASOTA FL 34234 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL VĎ ☐ Delete TITLE Change Change Addition TITLE SARASOTA FL 34234 NAME FERNANDEZ,G NAME STREET ADDRESS STREET ADDRESS 2500 TENTH ST. CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL Change ☐ Addition ☐ Delete TITLE TITLE FERNANDEZ, R. NAME NAME STREET ADDRESS STREET ADDRESS 2500 10TH ST CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: