FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 20 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **247191** **(0)**

1. Corporation Name
TIME & SPACE INC

Principal Place of Business	Mailing Address
1177 N.E. 79TH STREET MIAMI FL 33138	1177 N.E. 79TH STREET MIAMI FL 33138

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/04/1961	3a. Date of Last Report: 07/12/1994
4. FEI Number: 59-13658816	☐ 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	26 70 Camden Drive
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Bal Harbour Fla 33154
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SIMMONS,JERRY P
1177 N.E. 79TH STREET
MIAMI FL 33138

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	SIMMONS,MITTIE F.	12 NAME	
STREET ADDRESS	70 CAMDEN DR BAL HARBOUR	13 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	14 CITY-ST-ZIP	
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	SIMMONS,JERRY P.	22 NAME	
STREET ADDRESS	70 CAMDEN DR BAL HARBOUR	23 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	SIMMONS,MITTIE F	32 NAME	
STREET ADDRESS	70 CAMDEN DR BAL HARBOUR	33 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	SIMMONS,JERRY P.	42 NAME	
STREET ADDRESS	70 CAMDEN DR BAL HARBOUR	43 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	VANNOY, MARY ANGEL S.	52 NAME	
STREET ADDRESS	70 CAMDEN DR BAL HARBOUR	53 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mittie F. Simmons 4-11-95 305-947-7299
SIGNATURE AND TYPED OR PRINTED NAME OF RUNNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Mittie F. Simmons

0146722 CP