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 MAY -1 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 334201

1. Corporation Name
Spanish Advertising & Marketing Services of Florida, Inc.
c/o DMB&B, Inc. 1675 Broadway, N.Y., N.Y. 10019

Principal Place of Business

Mailing Address
1675 Broadway, 4th Floor
Tax Dept.
New York, NY 10019

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/26/1968
3a. Date of Last Report: 06/01/94

2. Principal Place of Business
21 801 Northeast 167th Street
22 Suite, Apt. #, etc: 300
23 City & State: North Miami Beach, Florida
24 Zip: 33162
25 Country:

2a. Mailing Address
26
27 Suite, Apt. #, etc
28 City & State
29 Zip
30 Country

4. FEI Number: 59-1219111 ☐ 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

9. Name and Address of Current Registered Agent
United Corporate Services, Inc.
801 Northeast 167th Street, Suite 300
North Miami Beach, Florida 33162

10. Name and Address of New Registered Agent
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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	11 TITLE	☐ Change ☐ Addition
NAME	Bostock, Roy J.	12 NAME	
STREET ADDRESS	1675 Broadway	13 STREET ADDRESS	
CITY ST ZIP	New York, NY 10019	14 CITY ST ZIP	
TITLE	Treasurer	21 TITLE	☐ Change ☐ Addition
NAME	Brown, Craig D.	22 NAME	
STREET ADDRESS	1675 Broadway	23 STREET ADDRESS	
CITY ST ZIP	New York, NY 10019	24 CITY ST ZIP	
TITLE	Secretary	31 TITLE	☐ Change ☐ Addition
NAME	Moore, Michael D.	32 NAME	
STREET ADDRESS	1675 Broadway	33 STREET ADDRESS	
CITY ST ZIP	New York, NY 10019	34 CITY ST ZIP	
TITLE	Assistant Secretary	41 TITLE	☐ Change ☐ Addition
NAME	Winclechter, David	42 NAME	
STREET ADDRESS	1675 Broadway	43 STREET ADDRESS	
CITY ST ZIP	New York, NY 10019	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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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 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: David Winclechter David Winclechter 5/31/95 (212) 468-2907
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #