

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 398726

1. Corporation Name
NATIONAL ENQUIRER, INC

Principal Place of Business

600 S E COAST AVE
LANTANA FL 33464

Mailing Address

600 S E COAST AVE
LANTANA FL 33464

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST.
SUITE 1
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 City

84 Zip Code

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 for certain filings)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

S GALIARDO, GUY 600 S.E. COAST AVE LANTANA FL

P BOYLAN, MICHAEL 600 S.E. COAST AVE LANTANA FL

T PICKERT, RICHARD 600 S.E. COAST AVE LANTANA FL

CD CALLAHAN, PETER 600 S.E. COAST AVE LANTANA FL

T NELSON, PETER A. 600 SE COAST AVE. LANTANA, FL

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

S BLICKSILVER, HARVEY 600 EAST COAST AVE. LANTANA, FL 33464

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-STATE-ZIP

21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-STATE-ZIP

31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-STATE-ZIP

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-STATE-ZIP

51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-STATE-ZIP

61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-STATE-ZIP

71 TITLE 72 NAME 73 STREET ADDRESS 74 CITY-STATE-ZIP

81 TITLE 82 NAME 83 STREET ADDRESS 84 CITY-STATE-ZIP

85 Zip Code

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, with all other like empowered

SIGNATURE: *Peter C. Nelson*

PETER NELSON 2/22/99

561-540-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Original Printed

FILED
Feb 23, 1999 08:00 AM
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/05/1972

4. FFI Number

59-2764097

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Election Campaign Financing

[]

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

[]

Yes

[]

No

10. Name and Address of New Registered Agent

CR2E034 (11/98)