Corporation Name RADIO WAVS hincipat Place of Busines 950 N FED. HWY #21 POMPANO BCH. FL 3	5, INC.	5 ((5)					
950 N FED. HWY #21								
		Mailing Address 950 N FED. POMPANO B	HWY #216 ICH. FL 33062			 Date incorporated or Qualified 	3a. Date of Last F	
2. Pencipal Place of Bus	iness	28. Mailing Addre	255			12/09/1974 4. FEI Number	01/23/1	
Suite, Apt. #, etc.		26 Suite, Apt. #,	, etc.	<u> </u>		59-1568946 5. Certificate of Status Desired	\$8.7	Not Applicable 5 Additional
City & State		27 City & State				6. Election Campaign Financing	Fee \$5.0	Required 00 May Be
 Zip 	Country 25	28 Zip 29	30	Countr	ý	Trust Fund Contribution 8. This corporation has liability for in Florida Statutes	tangible tax under s	ed to Fees 3 199.032,
g_ Nan	ne and Address of Curren	t Registered Agent	/ /	81	Name	10. Name and Address of New Re	gistered Agent	·
BRESKY, ROY H 950 NORTH FEDERAL HIGHWAY, #216 POMPANO BEACH 33062				82 Street Addre		ess (P.O. Box Number is Not Acceptable)	<u>,</u>
or registered agent, familiar with, and acc IGNATURE	or both, in the State of Floric cept the obligations of, Secti	la. Such change was on 607.0505, Florida I	authorized by I Statutes.	the cor	named corpor xoration's boar	ation submits this statement for the purp d of directors. I hereby accept the appoi	PL ose of changing its intment as registere	ip Code registered office d agent. I am
Signative typ 2.	erl or proted name of registered agent OFFICE'RS AND		······································	islered Age 13.	nt signature required	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECT	ORS IN 12
INEE CADDRESS 405	SKY, ROY H 0 NE 25TH AVE HT HOUSE PNT, FL0000			1 1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	T ADDRESS		Change	ORS IN 12
UE V					91°4N			
HEET ADDRESS 405	SKY, ANDREA F. 0 NE 25TH AVE. HTHOUSE BT. EI	DEL		2 1 TITLE 2 2 NAME 2 3 STREE	f ADDRESS		[] Change	
HEEY ADDRESS 4051 (Y-S1-ZIP LIGH ILE IME		DELI	ETE	2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY- 3 1 TIFLE 3 2 NAME	f ADDRESS ST-ZIP		Change	
HEET ADDRESS 4050 (Y - S1 - ZIP ILE MAE HEET ADDRESS TY - S1 - ZIP ILE MAE	0 NE 25TH AVE.		ETE	2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY- 3 1 TITLE 3 2 NAME 3 3 STRE 3 4 CITY- 4 1 TITLE 4 2 NAME	F ADDRESS ST- ZIP ET ADDRESS ST- ZIP			Addition
IHEE* ADDRESS 405	0 NE 25TH AVE.		ETE ETE ETE	2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY- 3 1 TITLE 3 2 NAME 3 3 STRE 3 4 CITY- 4 1 TITLE 4 2 NAME 4 3 STREE 4 4 CITY- 5 1 TITLE 5 2 NAME	T ADDRESS ST-ZIP ET ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS		Change	Addition