## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** THIS FEE IS RAPE OF FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortnanii ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (4)LATTA RADIO & T.V., INC. Principal Place of Business Mailing Address 11509 S. DIXIE 11509 S. DIXIE MIAMI FL 33156 MIAMI FL 33156 3. Date Incorporated or Qualified 3a. Date of Last Report 05/07/1976 04/25/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-1670862 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State Orty & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 ☐ Yes ☐ No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZWICK, MATTHEW B Street Address (P.O. Box Number is Not Acceptable) 62 19740 S W 87 PL MIAMI, FL 83 33157 84 City 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 Floridal Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and their appropria (NOTE: Regelered Agent signed are required when reinstating) 12. CR2E034 (12/95) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 TITLE ☐ Change ☐ Addition NAME VIDZES, STEVEN A 1.2 NAME STREET ADDRESS 11509 SO DIXIE HWY 1.3 STREET ADDRESS CITY - ST - ZIP MIAMI, FL 00000 1.4 CITY - ST - ZIP TITLE DELFTE 2 1 TITLE Addition. Change NAME ZWICK, MATTHEW B 2.2 NAME STREET ADDRESS 19740 S W 87 PLACE 2.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-7IP 24 CITY-ST-ZP TITLE []] DELETE 3 1 7:TLE Change ■ Addition NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST-ZIP 3.4 C(TY - S1 - Z)F TITLE DELETE 4 1 THEE Change Add-tion NAME 4.2 NAME STREET ADDRESS 4.3 STREEF ADDRESS CITY-ST-ZIP 4 4 CITY - ST - 71P TITLE DELETE 5 1 TIME Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5 4 City - ST- ZiP TITLE □ Det ETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS. CITY - ST - ZIP

64 CITY-S1 ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not does not graphly 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.

4/23/96 305 235-1771