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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

511313

(9)

MAXMEDIA, INC.

170 W FAIRBANKS AVE #203

Principal Place of Business

Mailing Address

450 E LAS OLAS BLVD

**FILED** Mar 30 1998 8:00am Secretary of State



BOX 847 WINTER PARK FL 32789		SUITE 1200 FT LAUDERDALE FL 33301 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21		26 110 S.E. Loth Street			<u>59-1685793</u>	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27 20th Floor			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State	e	City & State			6. Election Campaign Financing		
23		28 Ft. Laude	rdal	e FL	Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Co	untry	8. This corporation owes or has paid the cu		
24	25	29 33301	30	US .		Yes No	
	9. Name and Address of Curre	nt Registered Agent	******		10. Name and Address of New Registered	Agent	
C T CORPORATION SYSTEM					81 Name		
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				82 Street Address (P.O. Box Number is Not Acceptable)			
				30000	ddress (1.0. box Normber is Not Acceptable)		
				83			
				84 City		AEL Zin Codo	
				84 City	FL	85 Zip Code	
11. Pursuant to the provisions of Socions 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							
12.	Signature typed or printed name of registered ag	pent and title if applicable (N ND DIRECTORS	NOTE: Register		equired when reinstating) DATE	DIDECTODE IN 10	
TITLE	n Orricens Alv	DELETE		TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition	
NAME	HUDSON, HARRIS W	_ OLULE				<b>,</b> -	
STREET ADDRESS 450 E LAS OLAS BLVD., SUITE 1200				STREET ADDRESS	110 s.e. Lith Street, 204	h floor	
CITY-ST-ZIP	ET LAUDEDDALE EL			, and the same of			
TITLE	P	DELETE		CITY-ST-ZIP	7. Lauderdale, FL 3:	Change Addition	
NAME	HUIZENGA JR., H. WAYNE			NAME		A change Li Accilion	
STREET ADDRESS	450 E LAS OLAS BLVD., SU	ITE 1200		STREET ADDRESS	10 S.E. 6th Street, 204	h Floor	
ŀ	FT LAUDERDALE FL	716 7600				2201	
CITY-ST-ZIP TITLE	VS	DELETE	3.1	CITY-ST-ZIP	ft. Lauderdale, FL 3:	Change Addition	
NAME	COLE, JAMES O		I -	VAME		A Chinge Li Ribalitan	
STREET ADDRESS	450 E LAS OLAS BLVD., SU	ITF 1200			10 S.E. Lith Street, 201	t Elmor	
City-St-zip	FT LAUDERDALE FL	112 1200	4	OLIV CT TID	Chardender D 32	2001	
TITLE	T	☐ DELET <b>E</b>	4.11	CITY-ST-ZIP .	Ft. Lauderdale, FL 33	X Change Addition	
NAME	HYLE, KATHLEEN			NAME		Am Augusta	
STREET ADDRESS	450 E LAS OLAS BLVD., SU	ITE 1200	424	STREET ADDRESS IN	HAG Loomer ATEL 220	FLOOR	
CITY-ST-ZIP	FT LAUDERDALE FL		4.33	מוד פו דים עדוי	o s.e. uth street, 204 Ft. Lauderdale, FL 33:	77001	
TITLE		DELETE	5.13	TITLE	TI LADOCIONIE, TL 55:	Change Addition	
NAME				IAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		DELETE	6.1 1			Change Addition	
NAME				IAME		change radicion	
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP							
14. I hereby c	ertify that the information supplied w	vith this filing does not qualify	for the ex	emption stated	in Section 119.07(3)(i), Florida Statutes. I further ce	ertify that the information	
officer or o	on this annual report or supplement	al annual report is true and a eiver or trustee empowered t	iccurate ar	nd that my signa	ature shall have the same legal effect as if made un equired by Chapter 607, Florida Statutes; and that r	der oath: that I am an I I	