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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 531372

(1)

MEDIA DEPARTMENT II, INC.

FILED
Jan 22 1997 8:00am
Secretary of State

Principal Place of Business  1110 BRICKNELL AVE		Manang A	Mailing Address 1110 BRICKELL AVE			T (400HT B) SABE THOU TIERS NULL TESTO HER BIBLI BIBLI STRAT BIBLI BIBLI HERT			
Suite 430 °   Miami Fl 331	31 1- "	SUITE 430	) 33131-3170						
US	1000	US	50,01,0110			3. Date Incorporated or Qualified 04/12/1977		te of Last F 2/1996	Report
2. Principal	Place of Business	2a. Mailin	ıy Address			4. FEt Number	,,	<del></del>	pplied For
21		26				<u>59-1738380</u>		N	ot Applicable
Suite, Ap	t #, etc	Suite, <b>27</b>	Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & St	ale		State			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip		Countr	У	8. This corporation has liability for	intangible t	tay under s	. 199.032,
24	25	29		30		Florida Statutes	Yes 🎜	4.No	
	9. Name and Address of	Current Registered /	Agent			10. Name and Address of New Re	gistered A	gent	
	CCIO, ROSEMARIE			61	Name			•	
1	35 S.W. 98 TER			82	Street A	ddress (P.O. Box Number is Not Acceptal	ole)		
MI	AMI FL 33131								***************************************
				83	<b>3</b>				
				84	City			<b>85</b> Zip	Code
<u></u>				Ì	1 1		FL	1 1	
<b>11.</b> Pursuan	t to the provisions of Sections (	607.0502 and 607 150	8, Florida Stati	ites, the abov	re-named c	orporation submits this statement for the p	ourpose of	changing i	ts registered
agent f	registeres agent, or both that an familiar with, and accept b	re State of Floriga, Suc re obligations of, Section	:n onange was on 607.0505, F	i autnorizeo b Iorida Statute	y the corpo is.	oration's board of directors. I hereby acce	pt the appo	pintment as	registered
		**							
SIGNATURE									
SIGNATURE	Signal an Andrews and Andrews a			OTE: Registered Ag	post signature re	quired when reinstating)	DATE		
12.	OFFICE	slerec alarit and life if logica .RS AND DIRECTORS		TE Registered Ag	jent signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AND		RS IN 12
	OFFICE					ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR Change	
12.	OFFICE C Keoghan, Ken	RS AND DIRECTORS		13.			ERS AND		
<b>12.</b>	OFFICE C KEOGHAN, KEN 1110 BRICKELL AVENUE	RS AND DIRECTORS		13. 11 TITLE 1.2 NAME		ADDITIONS/CHANGES TO OFFIC	ERS AND		
12. TITLE NAME	OFFICE C Keoghan, Ken	RS AND DIRECTORS		13. 11 TITLE 1.2 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND		
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4. I do horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this arrival 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 conjunction 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/9/90

3053585178