FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 578069 (7)								
• • • •	UNITY BROADCASTERS, I	NC.						
Principal Place	of Business	Mailing Address				<u> </u>		
	IURRAY. B., JR. T. Causeway, #608	1686 79TH ST. CAUSE	C/O WEIL. MURRAY. B., JR. 1666 79TH ST. CAUSEWAY. #608 MIAMI BEACH FL 33141					
US	11 (2 0017)	US				3. Date incorporated or Qualified 3a. Date of Last Report 07/07/1978 04/26/1995		
2. Principal Pla	ace of Business	2a. Mailing Address	Mailing Address			4. FEI Number 59-1848451	Applied For Not Applicable	
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75 Additional	
City & State		City & State	<u> </u>			6. Election Campaign Financing	F86	Required 00 May Be
23		28	8			Trust Fund Contribution		
Zip - 24	Country Zip 29 30			Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No		
	9. Name and Address of Currer	nt Registered Agent		81	Name	10. Name and Address of New R	egistered Agent	
PRIO, M	ARIA F					(D.O. Da., M. a) La Ja Mat Aggretation	(a)	
ONE BISCAYNE TOWER, #3400					Street Addi	Address (P.O. Box Number is Not Acceptable)		
2 S. BISCAYNE BLVD.				83				
MIAMI FL 33131				84	City	FL 85 Zip Code		
11. Pursuant to	o the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the abo	ove-na	amed corpo	ration submits this statement for the pur	pose of changing its	registered office
or registere familiar with	ed agent, or both, in the State of Flori h, and accept the obligations of, Seci	da. Such change was authorize ion 607.0505, Florida Statutes.	ed by the o	corpo	ration's boa	rd of directors. I hereby accept the appo	ointment as registere	d agent. I am
SIGNATURE _	Signature typed or printed name of registered agent	and title if explicable #103	E Dog t word	Acons	Binnes in D. S.	id when reinstating)	DATE	
12.		D DIRECTORS	13.	Agen.	sigr a this require	ADDITIONS/CHANGES TO OFFI		ORS IN 12
TITLE	D	-		ITLE			☐ Change	☐ Addition
NAME	MEEK, CARRIE			1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP				
STREET ADDRESS CITY-ST-ZIP	6830 N.W. 28TH AVENUE MIAMI FL 33147							
TITLE				ITLE			☐ Addition	
NAME	WEIL, MURRAY B JR.			2.2 NAME				
STREET ADDRESS				TREET A	ADORESS			
CITY-ST-ZIP	MIAMI BEACH FL VSD	☐ DELETE	2.4 CITY - ST 3. 1 TITLE		- ZIP		Change	Addition
TITLE NAME	PRIO. MARIA E			3. I HILE 3.2 NAME			☐ Criange	L.J Addition
STREET ADDRESS ONE BISCAYNE TOWER #3400, 2 S BISCAYNE BLV				3.3. STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33131		3 4 CI	ITY - S1	- ZIP			
TITLE				4.1 THLE			☐ Change	☐ Addition
NAME			4.2 N					
STREET ADDRESS					ADORESS			
CITY-ST-ZIP TITLE	Popular			4 CITY - ST - ZIP 1 TITLE			[7] Change	Addition
NAME		_	5.2 N					
STREET ADDRESS					ADORESS			
CITY-ST-ZIP			5.4 CI	ITY-ST	- 21P			
TITLE	DELETE		6. 1 TITLE				☐ Change	☐ Addition
NAME			6.2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	v certify that the information supplied	with this filing is voluntarily furni		IY-SI does		for the exemption stated in Section 119.	07(3)(k). Florida State	utes. I further
certify that oath; that !	the information indicated on this ann	ual report or supplemental annu oration or the receiver or trustee	ial report i empowei	is true	e and accura	ate and that my signature shall have the is report as required by Chapter 607, Fig.	same legal effect as	if made under

SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR HURRAY B. WEIL JR 3/11/96 305 8242369