

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Secretary of State
Division of Corporations

DOCUMENT # **630879** (5)
1. Corporation Name: **PROMOTIONAL MEDIA, INC.**



Principal Place of Business: **3475 DELTONA BLVD SPRING HILL FL 34606**
Mailing Address: **3475-A DELTONA BLVD SUITE A SPRING HILL FL 34606**

2. Principal Place of Business: 21 **3479 Deltona Blvd** 26 **Some**
State: Apt. #, etc. City & State: **Spring Hill, Florida**
City & State: Zip: **34606** 25 **USA** 29 **USA** 30

3. Date Incorporated for Calendar: **07/26/1979** 3a. Date of Last Report: **03/06/1995**
4. FEIN Number: **59-1990523** Applied For: Not Applicable
5. Certificate of Status Devoid: **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes. Yes No

9. Name and Address of Current Registered Agent
**GONZALEZ, MARY C
3475 DELTONA BLVD SUITE A
SPRINGHILL FL 34606**

10. Name and Address of New Registered Agent
81 Name: **Mary C. Gonzalez**
82 Street Address (P.O. Box Not Acceptable): **2034 Bishop Rd.**
83
84 City: **Spring Hill** FL 85 Zip Code: **34606**

11. Pursuant to the provisions of Sections 607.02 and 607.03, Florida Statutes, the undersigned hereby certifies that the person named herein as the registered agent for the purpose of this report is a natural person who has accepted the obligations of a registered agent in Florida.

SIGNATURE: *Mary C. Gonzalez*

12. ADDITIONS CHANGE S TO OFFICERS AND DIRECTORS
TITLE: **PST** [] Delete
NAME: **GONZALEZ, MARY C**
STREET ADDRESS: **3475 DELTONA BLVD SUITE A**
CITY, ST, ZIP: **SPRINGHILL FL**
TITLE: [] Delete
NAME: [] Delete
STREET ADDRESS: [] Delete
CITY, ST, ZIP: [] Delete
TITLE: [] Delete
NAME: [] Delete
STREET ADDRESS: [] Delete
CITY, ST, ZIP: [] Delete
TITLE: [] Delete
NAME: [] Delete
STREET ADDRESS: [] Delete
CITY, ST, ZIP: [] Delete
TITLE: [] Delete
NAME: [] Delete
STREET ADDRESS: [] Delete
CITY, ST, ZIP: [] Delete

13. ADDITIONS CHANGE S TO OFFICERS AND DIRECTORS IN 12
TITLE: **PST** [x] Change [] Addition
NAME: **Gonzalez, Mary C**
STREET ADDRESS: **2034 Bishop Rd.**
CITY, ST, ZIP: **Spring Hill, FL 34608**
TITLE: [] Change [] Addition
NAME: [] Change [] Addition
STREET ADDRESS: [] Change [] Addition
CITY, ST, ZIP: [] Change [] Addition
TITLE: [] Change [] Addition
NAME: [] Change [] Addition
STREET ADDRESS: [] Change [] Addition
CITY, ST, ZIP: [] Change [] Addition

14. I do hereby certify that the information supplied is true and correct and that I am an officer or director of the corporation named herein and that my name appears in Block 12 or Block 13 of this report, or was so informed with a valid power.

SIGNATURE: *Mary Gonzalez* **Mary Gonzalez** 3-29-96 353-688-0430

CR2E034 (12/95)