FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 27 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 714051 (0)

1. Corporation Name

ADVERTISING FEDERATION OF GREATER MIAMI, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2050 CORAL WAY #403 MIAMI FL 33145	2050 CORAL WAY #403 MIAMI FL 33145

3. Date Incorporated or Qualified: 02/01/1968
3a. Date of Last Report: 03/11/1994
4. FEI Number: 59-2436156 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~SIMPSON, SHIRLEE~~ ~~2050 CORAL WAY #403~~ ~~MIAMI FL 33145~~	01 Name: George Chismark 02 Street Address (P.O. Box Number is Not Acceptable): 901 Northpoint Parkway, #102 03 04 City: West Palm Beach FL 05 Zip Code: 33407

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 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: George E. Chismark 4/20/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~TD~~	11 TITLE	TD ☐ Change ☐ Addition
NAME	~~KOVARIK, SUSAN~~	12 NAME	Olster, Marnie
STREET ADDRESS	~~3831 PIERCE ST #202~~	13 STREET ADDRESS	1201 Brickell Avenue, 5th Floor
CITY-ST-ZIP	~~HOLLYWOOD FL~~	14 CITY-ST-ZIP	Miami, FL 33131
TITLE	~~VPD~~	21 TITLE	VPD ☐ Change ☐ Addition
NAME	~~IRONE, ED~~	22 NAME	Scott, Linda
STREET ADDRESS	~~9240 SW 72 ST S218~~	23 STREET ADDRESS	20450 N.W. 2nd Avenue
CITY-ST-ZIP	~~MIAMI FL~~	24 CITY-ST-ZIP	Miami, FL 33169
TITLE	~~PD~~	31 TITLE	PD ☐ Change ☐ Addition
NAME	~~PARENTE, ROBERT~~	32 NAME	Rose, Patricia
STREET ADDRESS	~~1465 C SOUTH MIAMI AVE~~	33 STREET ADDRESS	234 Alesio Avenue
CITY-ST-ZIP	~~MIAMI FL~~	34 CITY-ST-ZIP	Coral Gables, FL 33134
TITLE	~~VPD~~	41 TITLE	VPD ☐ Change ☐ Addition
NAME	~~ZUBIZARRETA, JOE~~	42 NAME	Kovarik, Susan
STREET ADDRESS	~~2600 SW 3 AVE 9TH FL~~	43 STREET ADDRESS	800 E. Broward Blvd., #506
CITY-ST-ZIP	~~MIAMI FL~~	44 CITY-ST-ZIP	Fort Lauderdale, FL 33301
TITLE	~~VPD~~	51 TITLE	SD ☐ Change ☐ Addition
NAME	~~ROSE, PAT~~	52 NAME	Figueras, Mauricio
STREET ADDRESS	~~234 ALESIO AVE~~	53 STREET ADDRESS	825 S. Bayshore Drive, #843
CITY-ST-ZIP	~~CORAL GABLES FL~~	54 CITY-ST-ZIP	Miami, FL 33131
TITLE	~~D~~	61 TITLE	☐ Change ☐ Addition
NAME	~~SIMPSON, SHIRLEE~~	62 NAME	
STREET ADDRESS	~~2050 CORAL WAY #403~~	63 STREET ADDRESS	
CITY-ST-ZIP	~~MIAMI FL~~	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] April 7, 1995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000118