

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # F14131 (9)

1. Corporation Name

ION PUBLISHING, INC.



Principal Place of Business

Mailing Address

925 ARTHUR GODFREY ROAD, SUITE #200  
MIAMI BEACH FL 33140

925 ARTHUR GODFREY ROAD, SUITE #200  
MIAMI BEACH FL 33140

3. Date Incorporated or Qualified  
01/09/1981

3a. Date of Last Report  
04/25/1995

2. Principal Place of Business

2a. Mailing Address

21 960 ARTHUR GODFREY RD  
Suite, Apt. #, etc.

26 960 ARTHUR GODFREY RD  
Suite, Apt. #, etc.

22 SUITE 106  
City & State

27 SUITE 106  
City & State

23 MIAMI BEACH FL  
Zip Country

28 MIAMI BEACH, FL  
Zip Country

24 33140 FL  
Zip Country

29 33140 30 USA  
Zip Country

4. FEI Number  
59-2093353

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BITBOL, GILLES J  
925 ARTHUR GODFREY ROAD, SUITE #200  
MIAMI BEACH FL 33140

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

960 ARTHUR GODFREY ROAD

83

SUITE 106

84

MIAMI BEACH

FL

85 Zip Code  
33140

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:

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 PD ☐ DELETE

NAME BITBOL, KATHARINE  
STREET ADDRESS 925 ART. GODFREY RD. 200  
CITY-ST-ZIP MIAMI BEACH FL

TITLE CST ☐ DELETE

NAME BITBOL, GILLES  
STREET ADDRESS 925 ART. GODFREY RD. 200  
CITY-ST-ZIP MIAMI BEACH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

960 ARTHUR GODFREY RD #106  
MIAMI BEACH, FL 33140

☒ Change ☐ Addition

960 ARTHUR GODFREY RD #106  
MIAMI BEACH, FL 33140

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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)(k), 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 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 DIRECTOR

J.G. BITBOL

4/15/96

(305) 534-6105

CR2E034 (12/95)