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

PROFIT CORPORATION ANNUAL REPORT

SPECEL ADDRESS.



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

1996

DOCUN 1. Corporation	MENT # F6825	55 (1)							
•	L ADVERTISING, INC.					;			<u> </u>
Principal Place of Business * LOUISE M GAINEY 970 NE 92ND STREET		Mailing Address % LOUISE M GAINEY 970 NE 92ND STREET	% LOUISE M GAINEY						
MIAMI SHORE		MIAMI SHORES FL 331	38			3. Date Incorporated or Qualified 02/22/1982	3a. Dat	e of Last F 3/27/19	Report 95
2. Prinopal Pla 21	ice of Business	2a. Mailing Address 26				4. FEI Number 59-2161585			Applied For Not Applicable
Suite, Apl. s 22	i, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.7	5 Additional Required
Oity & State	· · · · · · · · · · · · · · · · · · ·	City & State				Election Campaign Financing Trust Fund Contribution		Adde	00 May Be ad to Fees
24]	Country 25	Z(p)	30	intry			□ No		199.032,
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New F	legistered	Agent	
GAINEY	LOUISE M			ן יים <u> </u>	rvarrie				
GAINEY, LOUISE M 970 NE 92ND STREET				82	Street Addre	ess (P.O. Box Number is Not Acceptat	ile)		
	HORES FL 33138			83					
	101120 12 00100								
				84	City		FI	85 Zi	ip Code
or registere	n, and accept the obligations of Sec	nda Such change was authorization 607.0505, Florida Statutes	ed by the d	corpx	oration's board	ation submits this statement for the pui d of directors. I hereby accept the app	pose of chointment as	anging its registered	registered office 1 agent. I am
12.	OFFICERS AN	ND DIRECTORS	13.	Agen	t signature required	ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTO	NRS INL12
TILE	PD	DELETE	1.17	ITLE		7.0011101103011111020110011		Change	Addition
NAME	GAINEY, LOUISE M		1.2 N	ME			•		
STREET LADDRESS	970 NE 92ND ST		1351	REET	ADDRESS				
CID St Zir	MIAMI SHORES, FL 00000		1.4 CI	1Y-S	1-21P				
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NAME			4 1 18				ı	Change	☐ Addition
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City St-ZiP			5.3 GT		l l				
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NAM6			6 2 NA				•	_ •	_

City - St - ZiF 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)(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.

63 STREET ADDRESS

SIGNING OFFICER OR DIRECTOR M. GAINEY 2/15/96 (305) 751-5488 SIGNATURE (