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Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90143 013 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F94000004812

1. Corporation Name

TRANSMEDIA SERVICE COMPANY

Principal Place of Business Mailing Address 11900 BISCAYNE BLVD. NORTH MIAMI FL 33181 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/16/1994 2. Principal Place of Business 2. Mailing Address 4. FEI Number 65-0515254 Not Applied For
NORTH MIAMI FL 33181 NORTH MIAMI FL 33181 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed (9) 16/1994 4. FEI Number 65-05 15254 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 22
NORTH MIAMI FL 33181 NORTH MIAMI FL 33181 DD NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/16/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0515254 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State Added to Fees Zip Country Zip Country Again Francing Added to Fees Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. SUITE 105 TALLAHASSEE FL 32301 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-mamed corporation submits this statement for the purpose of changing its registered agent. I am farmiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. D ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME CHASEN, MELVIN 11. PURS AND DIRECTORS 13. D ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME CHASEN, MELVIN
2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified 09/16/1994 2. Principal Place of Business 2. Mailing Address 3. FEI Number 65-05/15254 Suite, Apt. #, etc. Size Apt. #, etc.
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2. Principal Place of Business 2. Mailing Address 3. FEI Number 65-05 15254 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Zip Country Zip Country Zip Country Applied For Not Applicable \$8.75 Additional Fee Required Added to Fees \$8.75 Additional Fee Required City & State City & State Signature, Principal Place of Status Desired \$8.75 Additional Fee Required \$9.80 May Be Added to Fees \$9.75 Additional Fee Required \$9.75 Additional Fee
Suite, Apt. #, etc. Scretificate of Status Desired \$8.75 Additional Fee Required Fee Require
Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State Signature, typed or printed name of registered agent and title if applicable. City & State Country Added to Fees Required Signature, typed or printed name of registered agent and title if applicable. City & State City & State Country 8. This corporation owes the current year Intangible Personal Property Tax.
City & State 23 City & State City & State City & State State City & State State City & State State State State City & State S
Trust Fund Contribution
Zip Country Zip
29 30 Personal Property Tax. Yes No 9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. SUITE 105 TALLAHASSEE FL 32301 84 City FL 85 Zip Code 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 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, 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. D ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Henderson, Gene Change Addition Addition CHASEN, MELVIN
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TITLE D
NAME CHASEN, MELVIN 12 NAME 1 1 900 Biscavne Blvd.
I II JUD BISCAVIE BIVO.
STREET ADDRESS 11900 BISCAYNE BLVD. 13 STREET ADDRESS North Miami, FL 33181
CITY-ST-ZIP NORTH MIAMI FL 1.4 CITY-ST-ZIP
TITLE VD DELETE 2.1 TITLE P Change Addition
NAME LERCH, STEPHEN E. 22 NAME Donohoo, Christine
STREET ADDRESS 11900 BISCAYNE BLVD. 23 STREET ADDRESS North Miami, FL 33181
CITY-ST-ZIP NORTH MIAMI FL 33181 2.4CITY-ST-ZIP
TITLE \$ DELETE 3.1 TITLE
NAME FERARA, KATHRYN 32 NAME
STREET ADDRESS 11900 BISCAYNE BLVD. 3.3 STREET ADDRESS
CITY-ST-ZIP NORTH MIAMI FL 33181 3.4.CITY-ST-ZIP
TITLE DELETE 4.1 TITLE Change Addition
NAME BORGES, GREGORY 4.2 NAME
STREET ADDRESS 11900 BISCAYNE BLVD. 4.3 STREET ADDRESS
CITY-ST-ZIP NORTH MIAMI FL 33181 44-CITY-ST-ZIP

NORTH MIAMI FL 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

CALLAGHAN, JAMES

KAPLAN, BARRY S.

11900 BISCAYNE BLVD.

NORTH MIAMI FL 33181

11900 BISCAYNE BLVD

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

DELETE

Change

Change

Addition

☐ Addition