PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000001021

ROSIC ADVERTISING, INC.

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90206 014 ***150.00



| 5 1 1 1 5 | | Marillan Address | • | | | () | BILE LINES IIES INES |
|---------------------------|--|---|-----------------------|----------------------|--|-------------------------|----------------------|
| Principal Place | | Mailing Address | | | | | |
| 8424 NW 57 ST | | P.O. BOX 451059 SUNRISE FL 33345 | | | | | |
| US | | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | 03/03/1995 | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| 21 1 8 2 | 29 n. Pine Is | mand Rd. | | | 22-3191097 | | Not Applicable |
| | #, etc. | Suite, Apt. #, etc. | | | 5. Certifcate of Status Desired | | 5 Additional |
| 22 | | 27 | | | 5. Certificate of Status Desired | Fee | Required |
| City & State City & State | | | | - | 6. Election Campaign Financing | • | 0 May Be |
| 23 Plantation, to 28 | | | | _ | Trust Fund Contribution | Adde | ed to Fees |
| Zip Zip Zip | | | | 1 | 8. This corporation owes the current year | | |
| 24 35 | $044 _{25}$ | 29 30 | L | | Personal Property Tax. | ☐Yes | □No |
| | 9. Name and Address of Current | l Registered Agent | | | 10. Name and Address of New Registere | d Agent | |
| 0.25 | He buth t | | 81 | Name | | | |
| CYRUS, RUTH T | | | | Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| 11300 N.W. 25TH ST. | | | |] | | | |
| PLAN | NTATION FL 33323 | | 83 | | | | |
| | • | | 84 | City | | . 85 Z | ip Code |
| | | | | | | L | |
| 11, Pursuant | to the provisions of Sections 607.0502 | 2 and 607.1508, Florida Statutes, | the abov | e-named corp | poration submits this statement for the purpose | of changing | its registered |
| office or re | egistered agent, or both, in the State of | of Florida, Such change was authorions of Section 607 0505. Florida | orized by Statutes | the corporati | ion's board of directors. I hereby accept the applications | pointment as | registered |
| ! | III samilla will all alcelonie obligat | ions di Sociali soli socio, i sondo | | | 9/125/9 | 4 | |
| SIGNATURE | Signature, typed or printed name of registered agent | t and title if applicable (NOTE: Rec | jistered Age | nt signature require | red when reinstating) DATE | | |
| 12. | OFFICERS ANI | | 13. | | ADDITIONS/CHANGES TO OFFICERS | AND DIREC | TORS IN 12 |
| TITLE | PD | ☐ DELETE | 1.1 TITLE | | | Chang | ge 🗌 Additior |
| NAME | CYRUS, RUTH | | 1.2 NAME | | | | |
| STREET ADDRESS | 11300 N.W. 25TH ST. | | 1.3 STREE | T ADDRESS | | | |
| CiTY-ST-ZiP | PLANTATION FL 33323 | | 1.4 CITY- S | ST-ZIP | | | |
| TITLE | | | 2.1 TITLE | | | Chang | ge 🗌 Addition |
| NAME | CYRUS, ERIC | | 2.2 NAME | | | | |
| STREET ADDRESS | 11300 N.W. 25TH ST. | | | T ADDRESS | | | |
| \ | PLANTATION FL 33323 | | 2. 4 CITY- | | | | |
| CITY-ST-ZIP TITLE | 1 DATAMOIT I COUZU | ☐ DELETE | 3.1 TITLE | J. Alf | | Chang | ge 🗀 Addition |
| | | _ 5 | 3.2 NAME | | | | |
| NAME | | | | T ADDRESS | | | |
| STREET ADDRESS | | | | | | | |
| CITY-ST-ZIP | | ☐ DELETE | 3.4. CITY- | 51-419 | | Chan | ge |
| TITLE | | | | | | | v |
| NAME | | | 4.2 NAME | | | | |
| STREET ADDRESS | | | | TADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-5 | ST-ZIP | | Chan | ge 🔲 Addition |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | Chan | ge LI Addition |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | | TADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY-5 | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | Chan | ge Addition |
| NAME | | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREE | T ADDRESS | | | |
| CITY ST. 7ID | | | 6.4 CITY-5 | 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 pr 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.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

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