SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # G57839 HAWTHORNE/HOUSE ADVERTISING, INC. Principal Place of Business Mailing Address 6261 NW 6TH WAY 6261 NW 6TH WAY SUITE 101 SUITE 101 FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 3a. Date of Last Report 3. Date incorporated or Qualified 08/31/1983 04/19/1995 Applied For Mailing Address ▲ FEI Number 2. Principal Place of Business 2a. 59-2317608 oldspileqA toM 26 21 \$8.75 Additional Suite Apt #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 Country 8. This corporation has liability for intangible tax under s. 199.032, Żφ Ζip Country] Yes [] No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BEYER, GERALD Street Address (P.O. Box Number is Not Acceptable) 82 STE. 200 2691 E OAKLAND PARK BLVD. 83 FT. LAUDERDALE FL 33306 Zip Code 85 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. (NOTE for quirted Agent septial netropical when finished by) SIGNATURE Sing of the days that promote that a rather published agreet and the day placebile (3.6)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Ad:lit on DELETE 1 1 TITLE TITLE **CR2E034** 1.2 NAME HAWTHORNE, BRANDON NAME 1.3 STREET ADORESS 232 S. FIG TREE LANE STREET ADDRESS **PLANTATION FL** 1.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2.1 THLE TITLE HOUSE, MIKE 2.2 NAM(NAME 200 W. TROPICAL WAY 2.3 STHEET ADDRESS STREET ADORESS PLANTATION FL 2 4 CITY - ST- ZIP CITY-ST-ZIP Change Addition DELETE 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-SI-ZIP CITY - ST - ZIP Change Addition DELETE 4.1 TIFLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP Changé Addition DELETE 5 1 TH_F TITLE 5.2 NAM6 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 C:TY - ST ZIP CITY - ST- ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST. 7/P 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:
