MAY 09 '96 12:41 FR HARRISON DINER ET AL 305 920 2711 TO 7712008 P.03/06

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APPROVED AND FILED

1996 MAY 13 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # H21482

1 Corporation Name

HDC ADVERTISING, INC

Principal Place of Business | Mailing Address

2. Principal Place of Business
21 1901 W. CYPRESS CREEK RD
Suite, Apt. #, etc.
22 6th FLOOR
City & State
23 FORT LAUDERDALE, FL
Zip 24 33309 Country 25 US

2a. Mailing Address
26 SAME
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: SEPT 10, 1984
3a. Date of Last Report: JUNE 20, 1995
4. FEI Number: 59-2553982 ☐ 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

NORMAND TOUSIGNANT
3599 SATIN LEAF CT.
CORAL SPRINGS FL 33065 45

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 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 _____ DATE _____
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT / DIRECTOR JOHN DRURY 4992 NW 99th DR. CORAL SPRINGS, FL 33065	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT / DIRECTOR STAN HARRIS 11841 NW 11th ST PLANTATION, FL 33323	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT / DIRECTOR PHIL COHEN 1101 PARKSIDE CIRCLE NO. BOCA RATON, FL 33486	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY / TREASURER & DIRECTOR NORMAND TOUSIGNANT 3599 SATIN LEAF CT CORAL SPRINGS, FL 33065	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ 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)(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.

SIGNATURE: Normand Tousignant Normand Tousignant 5.10.96 954-771-1800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

KSP 5/13/96