## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H81289

(1)

**COLOR YOUR AD INC.** 

Principal Place of Business

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

21

9130 EMATHLA ST. MIAMI FL 33133

Mailing Address 3130 EMATHLA ST. MIAMI FL 33133-3227

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

## **FILED** Apr 25 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

04/30/1996

3. Date incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

10/16/1985

59-2598838

4. FLI Number

3]		28					Trust Fund Contril	oution L	<u>.</u>	Added	to Fees
Zip	Country		Zip	C	ounlry	′	8. This corporation h			ax under s	199.032,
4]	25	29		30			Florida Statutes	X Y	es 🗀	] No	
	Name and Address of Current	Regis	tered Agent				10. Name and Addre	ss of New Regis	lered A	gent	
	SLEY, JOSEPH W.				81	Name					
169	E FLAGLER ST				82	Street Address	ss (P.O. Box Number is	Not Acceptable)			
· SUN	TE 1400				-	Girock Addition	35 (1.0: BOX 140111301 12	(Vot Neoeptable)			
MIAI	MI FL 33131				83						
					0.4	0.7			,	7-1-3	0.1.
4.74					84	City	•		FL	<b>85</b> Zip	Code
office or r agent. I a	to the provisions of Soctions 607 0502 registered egent, or both, in the State of m familiar with, and accept the obligation	of Elori	da. Such change was a	authoriz	ed by	y the corporation	ration submits this state n's board of directors.	ement for the purp I hereby accept If	ose of o	changing i intment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered agen	c and litte	diapplicable (NO)	L : Registe	red Agr	int signature required	when reinstating)		OATE		
(2.	OFFICERS AND	DIRE		13	3.		ADDITIONS/CHAN	GES TO OFFICER			RS IN 12
FITLE	DPS		L] DELETE	1.1	111LE				[	Change	Addition
NAME	BEASLEY, GERRI G.			1.2	NAME	1					
STREET ADDRESS	3130 EMATHLA ST			1.3	STREFI	ADDRESS					
CITY-ST-ZIP	MIAMI FL			1.4	CITY-S	iT~ZIP					
TITLE			☐ DELETE	21	TITLE				[	Change	☐ Addition
NAME				2.2	NAME	ļ					
STREET ADDRESS				2.3	STREE 1	ADDRESS					
CITY-ST-ZIP				2.4	cny-	ST-ZIP					
TITLE			DEFELE	3.1	HILL				I	Change	Addition
VAME				3.2	Namé						
STREET ADDRESS				3.3	STREET	ADDRESS					
CITY-ST-ZIP				3.4	. CITY-S	S1 - ZIP					
MILE			☐ DELETE	4.1	TITLE				1	Change	Addition
NAME				4.2	NAME						
STREET ADDRESS				4.3	STREET	ADDRESS					
CHTY-ST-ZIP				4.4	CITY-S	I - ZiP					
TITLE			DELETE	5.1	THLE					Change	Addition
KAME				5.2	NAME						i
STREET ADDRESS				5.3	SIREFT	ADDRESS					ļ
CITY-ST-ZIP				5.4	Criy-S	1 - 7IP					
TITLE			☐ OCCETE	6.1	HILE			·	l	Change	Addition
NAME				6.2	NAME	1					i
STREET ADDRESS				63	STREET	ADDRESS					i
PITS-YTK				6.4	CITY-S	T-71P					
14. I do herel	by certify that the information supplied	with th	nis tiling does not qualit	v for th	e exe	motion stated in	n Section 119.07(3)(i), I	lorida Statutes. I	further o	certify that	the
informatio	n indicated on this annual report or su	ipplem	iental annual report is t	rue and	i accu	trate and that m	ny signature shall have	the same legal off	ect as i	f made un	der oath; that