

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # J40945 (4)

1. Corporation Name:

T.K.C. ADVERTISING ASSOCIATES, INC.

Principal Place of Business:

**ONE SE THIRD AVE
11TH FLOOR
MIAMI FL 33131
US**

Mailing Address:

**ONE SE THIRD AVE
11TH FLOOR
MIAMI FL 33131
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/04/1986

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2741121

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 § 199.05,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business:

21

State Apt # etc.

22

City & State:

23

City

24

State

25

City

26

State

27

City

28

State

29

City

30

State

9. Name and Address of Current Registered Agent

**FRIEDLANDER, BRUCE D.
ONE SE THIRD AVE
SUITE 1101
MIAMI FL 33131**

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

(Signature of Registered Agent or Director)

(Signature of Registered Agent or Director)

(Signature of Registered Agent or Director)

12. OFFICERS AND DIRECTORS

1. TITLE

PS

NAME

PAPPAS, MARIE

STREET ADDRESS

ONE SE THIRD AVE 11TH FLOOR

CITY, ST, ZIP

MIAMI FL

2. TITLE

D

NAME

SHAW, RAY

STREET ADDRESS

ONE SE THIRD AVE 11TH FLOOR

CITY, ST, ZIP

MIAMI FL

3. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

4. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

6. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

7. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP ☐ Change ☐ Addition

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP ☐ Change ☐ Addition

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP ☐ Change ☐ Addition

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP ☐ Change ☐ Addition

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP ☐ Change ☐ Addition

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP ☐ Change ☐ Addition

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), 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 this corporation or that I am or have been 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:

Ray M. Shaw

Ray M. Shaw 4/26/95

305-371-3592

Date

Telephone Number