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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J59484**

MARCH MEDIA, INC.				E JANESTIA ATAK ATIKA MENI ATAK	L 1860 ANNO ANNO ANNO ANNO ANNO	1 21 111 11 111 11 11 1 1	
Principal Plac	e of Business	Mailing Address			T SEMISION BYEN BYING I DITTE BYEN		817 61811 81811 1881
P.O.BOX 308 P.O.BOX 308					· ·		
4044 NEWPORT DR. 4044 NEWPORT DR. NEW PORT RICHEY FL 34656-7308 NEW PORT RICHEY FL 34656-			6.7900		DO NOT W	RITE IN THIS SPACE	
NEW PONT NIGHET PE 34030-7300 NEW PONT NIGHET PE 34030-7			0-7300		Do NOT W Do NOT W Do NOT W The incorporated or Qualife		
					03/02/1987	~~	
Principal Place of Business 2a. Mailing Address				4. FEI Number		Applied For	
21 26				59-2780762		Not Applicable	
Suite, Apt. #, etc.				5. Certifcate of Status Desired	11	5 Additional	
22 27 City & State City & State						Required	
23 28				Election Campaign Financin Trust Fund Contribution		00 May Be ed to Fees	
Zip Country Zip			Country		8. This corporation owes the co		
24 25 29 30		0		Personal Property Tax.	Yes	□No	
	9. Name and Address of Current	Registered Agent	04	N	10. Name and Address of Nev	Registered Agent	
WEF	RNER EV		81	Name			,
4932 MARUN DR.		82	Street Add	Iress (P.O. Box Number is Not Acce	•		
NEW PORT RICHEY FL 34652		83	-	- 25 (173 5-44) Visit test, 400円 (57) を扱い(37度)会員 20円	e jäng bing bida gebai geraj begas b 1801.a bild bida Alda Alda bilda b	SI PISH PISH IPH	
on one was		4 15 25 2 1 1	84	City	er e	FL 85 2	ip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above	e-named corp	poration submits this statement for the		its registered
agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with and accept the obligation	ons of Section 607.0505, Florid	norized by la Statutes	tne corporati	ion's board of directors. I hereby acc	ept the appointment a: رــــــــــــــــــــــــــــــــــــ	registered 2
SIGNATURE	- Yessens 111	11/000				1-11	7
12.	Signature, typed or printer name of registers agent OFFICERS AND		egistered Agen	t signature require	ed when religitating) (小子符) ADDITIONS/CHANGES TO C	DATE /	TOPS IN 12
TITLE	DVS	DELETE	1.1 TITLE		4° 242, 732	☐ Chan	
NAME	BOYCE, W.H.		1.2 NAME		A A A A A A A A A A A A A A A A A A A		
STREET ADDRESS	7066 RED OAK LOOP		1.3 STREET	ADDRESS			
CITY-ST-ZIP	NEW PORT RICHEY FL		1.4 C/TY+ST	r-zip			
TITLE	Τ	DELETE	2.1 TITLE		"	☐ Chan	ge
NAME	BOYCE, W.H.		2.2 NAME		•		
STREET ADDRESS	7066 RED OAK LOOP		2.3 STREET	ADDRESS		. ,	
CITY-ST-ZIP	NEW PORT RICHEY FL	□ pe: exc	2.4 CITY-S	T-ZIP			- Contraction
TITLE	DP WERNER, E.V.	☐ DELETE	3.1 TITLE			☐ Chan	ge Addition
NAME /	4932 MARLIN DR.		3.2 NAME				
STREET ADDRESS CITY-ST-ZIP	NEW PORT RICHEY FL		3.3 STREET				
TITLE	THE TOTAL TROTLET TE	☐ DELETE	3.4. CITY-S	1-219		Table Bid: Sign 218 T Chan	e 🎉 🔝 Addition
NAME OX COR	<u> </u>						· –]
STREET ADDRESS	į.		4.2 NAME	I .			
	Hoa i	1) 6.74 (0 2764 (F 000 (0)	4.2 NAME 4.3 STREET	ADDRESS			
CITY-ST-ZIP		n gegeng Mesignoberges Geset alle en les fantse					
CITY-ST-ZIP		MMARK DOWN ON	4.3 STREET			☐ Chan	ge 🔲 Addition
		MARINE DE PORTO DE LA COLORADA LA COLORA DE LA COLORADA	4.3 STREET 4.4 CITY-ST 5.1 TITLE 5.2 NAME	r-ZiP	0 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	☐ Chan	ge
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TITLE NAME		MARINE DE PORTO DE LA COLORADA LA COLORA DE LA COLORADA	4.3 STREET 4.4 CITY-ST 5.1 TITLE 5.2 NAME	ADDRESS	03/71 - 9 7 18/27 - 162	☐ Chan	

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 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 attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Rob will Day this

NEW FOR BOHEVOR

TITLE

NAME

STREET ADDRESS

☐ DELETE

FILED

Feb 06, 1999 8:00am

Secretary of State

02-06-1999 90003 034 ***150.00

☐ Change

☐ Addition