

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 8:00 am
Secretary of State

01-15-2004 90002 044 ***150.00

DOCUMENT # J65594

1. Entity Name
THE IMPACT OF ADVERTISING, INC.



Principal Place of Business
**20800 NW 2ND AVENUE
US HIGHWAY 441
MIAMI, FL 33169 US**

Mailing Address
**PO BOX 69-9024
MIAMI, FL 33269-9024 US**

44006090



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

59-2825376

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FODIMAN, TODD A
1200 BRICKELL AVE
STE 1720
MIAMI, FL 33131**

Name
FODIMAN, TODD A., ESQ.
Street Address (P.O. Box Number is Not Acceptable)
**1111 BRICKELL AVENUE
SUITE 1720
MIAMI FL 33131**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Todd A. Fodiman

1/7/04

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME ZINN, WARREN H.
STREET ADDRESS 20800 NW 2ND AVENUE, US HWY 441
CITY-ST-ZIP MIAMI, FL

TITLE STD ☐ Delete
NAME ZINN, DAVID
STREET ADDRESS 20800 N.W. 2ND AVENUE
CITY-ST-ZIP MIAMI, FL

TITLE AS ☐ Delete
NAME BRAND, DAVID H.
STREET ADDRESS 20800 NW 2ND AVENUE, US HWY 441
CITY-ST-ZIP MIAMI, FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SECRETARY/TREASURER ☒ Change ☐ Addition
NAME ZINN, DAVID
STREET ADDRESS 20800 N.W. 2ND AVENUE
CITY-ST-ZIP MIAMI, FL 33169

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **DAVID H. BRAND, ASST. SECY./C.F.O.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/04

DATE

305-690-6060

Daytime Phone #