| CORP ANNUA | ROFIT PORATION AL REPORT 996 | | Secretary | IMENT OF STAT Mortham y of State ORPORATIONS | E | | | |
|--|---|--|---|--|-------------------------------------|--|--------------------------|---|
| OCUN Comporation | 1ENT# | K17245 | (7) | | | | | |
| • | PUBLISHING (| GROUP, INC. | | | | | ER BIGE BIRN BIRNE O | MANI BIRNA RIBIN SARIK IRRA |
| incipal Place o | of Rueinage | ¥ | Mailing Address | | | | | |
| 1355 N.W. 83F MIAMI PL 3317 | | 1355 N.W. 93RD CT., St MIAMI FX 93172 | JITE A-105 | | | | | |
| , , | | | , . | | | 3. Date Incorporated or Qualified 03/08/1988 | | Last Report 24/1995 |
| | ce of Business | n smeer | 2a. Mailing Address 26 7126 N.W. | 50 ST | استونيد | 4. FEI Number 65-0046990 | | Applied For Not Applicable |
| Suite, Apt. #, | | O STREET | Suite, Apt. #, etc. | , 50 316 | <u> </u> | Certificate of Status Desired | | \$8.75 Additional Fee Required |
| City & State | | | City & State | | | 6. Election Campaign Financing | | \$5.00 May Be |
| MIAM Zip | II, FL Cou | intry | 28 M/AM) , | Country | | Trust Fund Contribution 8. This corporation has liability for | or intangible tax u | Added to Fees under s 199.032, |
| 33 | | USA dress of Current | 29 33166 Registered Agent | 30 15 | 4 | Florida Statutes Y | es □No vRegistered Ag | ent |
| | g. Hamile Bild Ad | | | 81 N | ame | | | |
| | CARLETT | | | 82 S | treet Addres | ss (P.O. Box Number is Not Accept | table) | |
| MIAKK FI | / 93 CT A-105 33178 | | ADDRESS CHM | 16E 83 | 1177 | TANK DO DINE | | |
| | . 2 | | only | 84 C | ity | | FL | 85 Zip Code 33166 |
| Pursuant to | the provisions of S | octions 607 0502 s | and 607 1509. Florida Statutor | | MIA | MI | | ging its registered office |
| or registers | | | | s, the above-nant | ed corpora | tion submits this statement for the i | parposo or orient | |
| familiar with | nd agent, or both, in n, and accept the es | the State of Florida ligations of, Sectio | ing 607,1308, rionda statute. I. Such change was authorize n 607,0505, Horide Statutes. | s, the above-nani d by the corpora | ied corpora tion's board | tion submits this statement for the a Lof directors. Thereby accept the a | ppointment as re | gistered agent. I am |
| IGNATURE _ | | <u>> سمب</u> | lut Siha | | | tion submits this statement for the life of directors. I hereby accept the a | ppointment as re | gistered agent. I am , |
| IGNATURE _ | ad agent, or both, in n, and accept the of Signature, types or profest in | the State of Florida ligations of, Sectional are of registered appet and OFFICERS AND | nd title if application (NO) | s, the above-named by the corporal E. Registered Agent signal. | | | OFFICERS AND D | 9 6 DIRECTORS IN 12 |
| IGNATURE _ | Signature, typod or pented n | ame of registered agent at OFFICERS AND | nd title if application (NO) | E. Registered Agent sig. 13. 1.1 TITLE | | when reinstating) | OFFICERS AND D | 96 |
| GNATURE | Signature, typed or printed in D SILVA, SCARL | arne of registered against a OFFICERS AND | of tille it application (NOT DIRECTORS | 13. 1.1 TITLE 1.2 NAME | arine required | when reinstating) | OFFICERS AND D | 9 6 DIRECTORS IN 12 |
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SIGNATURE:

4/30/96 305-471-5622