

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

FILED

Jun 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **K64384**
1. Corporation Name
NEWSMAKERS, INC.

Principal Place of Business
**7218 W 4th Ave #47
Hialeah Fl 33014**

Mailing Address

000002226760
-06/30/97--01132--002
***550.00

21	22	23	24	25	26	27	28	29	30	31	32	
2. Principal Place of Business					2a. Mailing Address					4. FEI Number 592931508		Applied For Not Applicable
Suite, Apt #, etc.					Suite, Apt #, etc.					5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
City & State					City & State					6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
Zip		Country			Zip		Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No		
24		25			29		30					

9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
John Bladen P.O. Box 874 Blair OK 73524					B1	Name John J. BLADEN BLADEN			
					B2	Street Address (P.O. Box Number is Not Acceptable) 5557 W OAKLAND PARK BLVD			
					B3	#190			
					B4	City LAUDERHILL	FL	B5	Zip Code 33313

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: John Bladen PRESIDENT / DIRECTOR 6-6-97

12. OFFICERS AND DIRECTORS					13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	DIRECTOR <input type="checkbox"/> DELETE				11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	John Bladen				12 NAME	N/A			
STREET ADDRESS	P.O. Box 874				13 STREET ADDRESS	P.O. Box 874			
CITY - ST - ZIP	Blair OK 73524				14 CITY - ST - ZIP	Blair, OK 73526			
TITLE	PRESIDENT <input type="checkbox"/> DELETE				21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	John Bladen				22 NAME	N/A			
STREET ADDRESS	P.O. Box 874				23 STREET ADDRESS	P.O. Box 874			
CITY - ST - ZIP	Blair OK 73524				24 CITY - ST - ZIP	Blair, OK 73526			
TITLE	<input type="checkbox"/> DELETE				31 TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					32 NAME				
STREET ADDRESS					33 STREET ADDRESS				
CITY - ST - ZIP					34 CITY - ST - ZIP				
TITLE	<input type="checkbox"/> DELETE				41 TITLE	SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					42 NAME				
STREET ADDRESS					43 STREET ADDRESS				
CITY - ST - ZIP					44 CITY - ST - ZIP				
TITLE	<input type="checkbox"/> DELETE				51 TITLE	TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					52 NAME				
STREET ADDRESS					53 STREET ADDRESS				
CITY - ST - ZIP					54 CITY - ST - ZIP				
TITLE	<input type="checkbox"/> DELETE				61 TITLE	VP/S/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME					62 NAME	Felisa Owens			
STREET ADDRESS					63 STREET ADDRESS	5557 W OAKLAND PARK BLVD #190			
CITY - ST - ZIP					64 CITY - ST - ZIP	LAUDERHILL FL 33313			

14. I do 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 an attachment with an address.

SIGNATURE: John Bladen 6-6-97 305-826-1344 405-563-2028

CR2E034 (9/96)