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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K95750

(1)

RJM ADVERTISING, INC.

Principal Place of Business

C/O RICHARD JOSEPH MERTES 500 N.E. SPAMISH RIVER BLVD. S 8 Mailing Address

C/O RICHARD JOSEPH MERTES 500 N.E. SPANISH RIVER BLVD. S 8 BOCA RATON FL 33431-4516

FILED Apr 28 1997 8:00am Secretary of State



		BOCA RATON FL 33431-4516	3		•
	•				3. Date Incorporated or Qualified 3a. Date of Last Report 07/09/1996
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21 536 5	W. ATHANTIC AV	26 5365W.A	TLAN	1716/	4 65-0157860 Not Applicable
Suite, Apt. (TE 501	Suite, Apt. #, etc.	501	•	5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	RAY BOH FE	City & State 28 NEARAY	BeH	, The	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	7 7 7 A R 4	Country	4 44 4	This corporation has liability for intangible tax under s. 199,032, Florida Statutes
24 334	9. Name and Address of Current	Penistered Apent		~~ 0	Florida Statutes Yes No 10. Name and Address of New Registered Agent
MEO	- 7i	Hogisteros rigorit	Bi	Name	10, Traine and Produces of Their Programme Agent
MERTES, RICHARD JOSEPH 15144 TALL OAK AVE DELRAY BCH FL 33446					
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84	City	FL 85 Zip Code
office or re	o the provisions of Sections 607.0502 egistered agent, or both, in the State on mailiar with, and accept the obligat	if Florida. Such change was aut	horized by	the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed manic of registered agent	and title if applicable (NOTF H	legistered Age	nt signature r	required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TOLE		☐ Change ☐ Addition
NAME	MERTES, RICHARD JON		1.2 NAME		
STREET ADDRESS	15144 TALL OAK AVENUE		1.3 STREET	ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL		1.4 DITY-S	T-ZIP	
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	MERTES, RICHARD JOSEPH		2.2 NAME		
STREET ADDRESS	15144 TALL OAK AVENUE		2.3 STREET	ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL		2.4 CITY- S	ST-ZIP	
TITLE	D	☐ DELETE	3 1 TITLE		Change Addition
NAME '	MERTES, MARGARET C.		3.2 NAME		
STREET ADDRESS	15144 TALL OAK AVENUE		3.3 STREET	ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL		3.4. CITY - 5	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME	ĺ	
STREET ADDRESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY-S	7- ZIP	
TITLE		DELETE	51 THLE		Change Addition
NAME			5.2 NAME	l	
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY-ST-ZIP			5.4 CITY - S	T-ZIP	1
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			62 NAME	-	
STREET ADDRESS			6.3 STREET	ADDRESS	
CITY-ST-ZIP			6.4 CITY-S	- 1	
14. I do hereb	a ladianted on this appual report or au	antomantal annual conoci la truc	for the exe	mption sta	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the distance that my signature shall have the same legal effect as if made under oath; that report as required by Chapter 607, Florida Statutes; and that my name