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PROFIT CORPORATION ANNUAL REPORT

1997

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

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Feb 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L39972**

(9)

SPANISH PERIODICAL AND BOOK SALES, INC.

Principal Place of Business Mailing Address P O BOX 4076 10100 N W 25TH STREET EDISON NJ 08818-4076 MIAMI FL 33172 US 3. Date Incorporated or Qualified 01/04/1990 3a Date of Last Report 01/24/1996 2a. Mailing Address 2. Principal Prace of Business Applied For 6688 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Domersel 23 Trust Fund Contribution Added to Fees Ζp Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Brunjes, Robert 81 Name 10100 NW 25TH ST Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33172 83 84 City Zip Code 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 Signature, typind or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE THILE 1.1 TITLE GELFAND, ARTHUR NAME 1.2 NAME 125 CLEARVIEW AVE LEXECUTIVE DA SUITE 151 STREET ADDRESS 1.3 STREET ADDRESS **EDISON NJ** Somerset, NJ 0/TY - \$1 - ZIP 1.4 CITY-ST-ZIP DELETE THILE 2.1 TITLE Addition NAME **2.2 NAME** STREET ADDRESS 2.3 STREET ADDRESS CHY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CHTY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Additio NAME: 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE -02/04/97--01024--044 NAMÉ 6.2 NAME ***165.00 STREET ADDRESS 6.3 STREET ADDRESS CITY-S1-ZIP 6.4 CITY-ST-ZIP

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 eath; 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