AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CORPORATION

FLORIDA DEPARTMENT OF STATE

FILED Jul 22, 1999 8:00 am Secretary of State

	AL REPORT	Secreta	ry of Stat	te		Secreta	•	
1999 DIVISION OF CORPO				RATIONS		07-22-1999 9	0017 045 **	'*550.00
	MENT # 1.56076	1/						
	GO MAGAZINES, INC.	V						
OIT III	. So in the Little of into-							
Principal Place	of Business	Mailing Address				L SOUTSOIT ROL WITH BRISK RELEGY APPEAR OTH	i Britrii Oriorii Gritrii Orio	il denti <b>min</b> ti imat
3101 SW 34TH AVENUE 3101 SW 34TH AVE								
SUITE 905 905 OCALA FL 34474 OCALA FL 34474						DO NOT WRITE IN	THIS SPACE	
UCALA FL 344 US	// <del>4</del>	US				3. Date Incorporated or Qualified	THO OF NOL	
						03/06/1990		
<del>-</del>	ace of Business	-2a. Malling Address			4. FEI Number	<u> </u>	polled For	
21]	# ata	Suite, Apt. #, etc.				59-3001010		ot Applicable Additional
Suite, Apt. i	w, BiC.	27				5. Certificate of Status Desired		equired
City & State	)	City & State				8. Election Campaign Financing		May Be
23		28	Cou	noto:		Trust Fund Contribution		to Fees
Žip	Country 25	2ip	30	aiu y		<ol> <li>This corporation owes the current year intangible Personal Property.</li> </ol>	a" ☐ Yes [	No
24	9. Name and Address of Current		1001			10. Name and Address of New Registr	red Agent	
				81 Nam	•	<del></del>		
	CHENS, EUGENE			82 Stree	t Addre	ss (P.O. Box Number is Not Acceptable)		
445 NE 8TH AVE. OCALA FL 34470				83				
				64 City			FL 85 Zip	Code
11. Pursuant office or r	to the provisions of sections 607.0502 registered agent, or both, in the State or familiar with, and accept the philippe	and 607.1508, Florida Statute f Florida, Such change was a long of section 607.0505, Florida	es, the ab authorized orida Stat	ove-named d by the co	corpora poration	tion submits this statement for the purpose is board of directors. I hereby accept the a	of changing its re appointment as n	egistered egistered
SIGNATURE							- NTE	<del></del> 1.
12	Signature, typed or printed name of registered agent OFFICERS AND		13.	red Agent sign	one tedm	ad when reinstating) DA ADDITIONS/CHANGES TO OFFICER		ORS IN 12
TITLE				1.1 TITLE P			Change	DRS IN 12
NAME	KOHN, GEORGE D.		1.2 N			HN, GEORGE D.	•	[8]
STREET ADDRESS	3101 SW 34TH AVE STE 905		1.3 ST	REET ADDRESS	24	18 445 31 5W 34th Ave., #905		18
CITY-ST-ZIP			- 1		311	SI 2 M SA MIC. L. 100		1 77
	OCALA FL			TY-ST-ZIP	- 00	ALA, FL	102	
TITLE	ST	DELETE	2.1 11	ΠE	00	ALA, FL	Change	Addition
NAME	ST KOHN, TERESSA	DELETE	2.1 TT 2.2 NA	ΠE	57 KO	HN TERESSA		
	ST	☐ DELETE	2.1 TTT 2.2 NA 2.3 ST 2.4 CT	ILE NME REET ADORESS TY-ST-ZIP	57 KO	HN TERESSA		
NAME STREET ADDRESS	ST Kohn, Teressa 3101 SW 34TH AVE STE 905	☐ DELETE	2.1 TTT 2.2 NA 2.3 STT 2.4 CT 3.1 TTT	TLE ME REET ADORESS TY-ST-ZIP TLE	57 KO	HN TERESSA		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ST Kohn, Teressa 3101 SW 34TH AVE STE 905		2.1 TO 2.2 MA 2.3 ST 2.4 Gr 3.1 TO 3.2 NA	TLE NME REET ADORESS TY-ST-ZIP TLE NME	0 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	HN TERESSA		Addition
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14.   hereby ce indicated o an officer of an o	ST KOHN, TERESSA 3101 SW 34TH AVE STE 905 OCALA FL  ortify that the information supplied with the interest of the coporation or the recurrence of the coporation of the copora	DELETE  DELETE  DELETE  DELETE  DELETE	2.1 TTT 22 NA 23 STT 3.1 TTT 3.2 NA 3.3 STT 4.4 CT 4.1 TTT 4.2 NA 4.3 STT 5.2 NA 5.3 STT 5.4 CT 6.1 TTT 6.2 NA 6.3 STT 6.4 CT 6.5 STT	ILE  REET ADDRESS TY-ST-ZIP  ILE  ME REET ADDRESS TY-ST-ZIP  ILE  ILE  ILE  ILE  ILE  ILE  ILE  I	OZ ST KOO PAN 31 OX	HN, TERESSA  AB, 445  OISW 34 th Ave., #905  CATO., EL.	Change Change Change Change	Addition  Addition  Addition  Addition  Addition