


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 MAY -2 AM 11:26 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company TAMA BROADCASTING GROUP OF FLORIDA, L.C. 121 N.W. 6TH AVENUE FORT LAUDERDALE FL 33311		DOCUMENT #L96000000102 1a. Principal Place of Business Address 121 N.W. 6TH AVENUE FORT LAUDERDALE FL 33311			
<small>If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.</small>					
2. Principal Place of Business <i>Same</i>		2a. Mailing Address <i>P.O. Box 238 Fort Lauderdale, FL</i>		3. Date Organized or Qualified <i>01/24/1996</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation <i>FL</i>	
City & State		City & State		4. FEI Number <div style="text-align: right;"><input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable</div>	
Zip	Country	Zip	Country	5. Date of Last Report	
		<i>33302</i>		6. Certificate of Status Desired <div style="text-align: right;"><input checked="" type="checkbox"/> Additional Fee Required</div>	
7. Name and Address of Current Registered Agent CHERRY, CHARLES W II 121 N.W. 6TH AVENUE FORT LAUDERDALE FL 33311			8. Name and Address of New Registered Agent <div style="border: 1px solid black; padding: 5px;">Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. <i>100002173051-6 -05/09/97-01118-008 *****8.75 *****1.75</i></div> <div style="border: 1px solid black; padding: 5px;">City <i>FL</i> Zip Code</div>		
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
<i>MGRM</i>	CHERRY, CHARLES W II	121 N.W. 6TH AVENUE		FORT LAUDERDALE FL	
<i>MEM</i>	CHERRY, GLENN W	121 N.W. 6TH AVENUE		FORT LAUDERDALE FL	
<i>MEM</i>					
<i>MORM</i>					
<i>100002173051-6 -05/09/97-01118-008 *****203.75 *****203.75</i> <i>05-7-97</i>					
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: <i>Charles W. Cherry II</i> 4/29/97 934-527-078 <div style="display: flex; justify-content: space-between;"><div><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small></div><div><small>Date</small></div><div><small>Daytime Phone #</small></div></div>					