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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

M43821

(1)

RADIO ACQUISITION, INC.

Denoinal Place of Business

Makaa Addresa



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% STEVE ALPERT/BROWARD RADIO 3056 SOUTH STATE ROAD 7 - BLDG. 58 MIRAMAR FL 33023		% STEVE ALPERT/BROWARD RADIO 3056 SOUTH STATE ROAD 7 - BLDG. 58 MIRAMAR FL 33023			
				3. Date Incorporated or Qualified 12/23/1986	3a. Date of Last Report 06/13/1995
2. Principal Place of Bus	iness	2a. Mailing Address	102 040	4. FEI Number 59-2748405	Applied For
Suite, Apt. #, etc.		26 758J NN 183 AV		59-2/48405   Not Applicable   S8.75 Additional	
		26 1585 NN 183 AV & Suite Apt. #, etc. 27		5. Certificate of Status Desired	Fee Required
City & State		City & State  Pembruke	PINES FL	Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
Zip 4	Country 25	29 3302-9	Country 30 USA	8. This corporation has liability for i	intangible tax under s. 199 032. □ No
	ne and Address of Curre	nt Registered Agent		10. Name and Address of New R	legistered Agent
			81 Name	STEVE ALDER	24
ALPERT, STEVE			82 Street Addre	ID O. Boy Number is Not Acceptab	olo)
%BROWARD R/			83	585 NW 183 AV	
3056 S. STATE MIRAMAR FL 3					
MINAMANTES	3023		84 City	nbroke pines	FL 85 Zp Code 330 29
11. Pursuant to the prov	isions of Sections 607.050	2 and 607.1508, Florida Statutes	The above paged correct	alion euboate this statement for the rour	ropeo of charging its registered off
or registered agent,	or both, in the State of Flor	rida, Buch change was authorized http://doi.org/10.000/10.0000000000000000000000000000	i by the corporation's boar	d of directors. Thereby accept the appl	ointment as registered agent. Lam
SIGNATURE	Mine CA	Sur	VA STEVER	U Alpert .	J-w-96
SIGNATURE Signature of	de or printed name of registers of registers of		Rigistered Agent signature requires		
2.	OFFICER'S AF	NO DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
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450	ERT, JAN		1.2 NAME		
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certify that the information indicated on this annual report or supplemental au bal 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 trustife empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an andress

SIGNATURE:

OKDIRECTOR STEVE Affect VP Shelf & 954-989508V