## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Corporation Name

M67419

(5)

DELRAY ADVERTISING AGENCY, INC.

FILED Aug 19 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address			- I TORIODALI ALD DASIR HADAK DIRAH THRUM TARK DIDAN DIDIN D		
384 S. MILITARY TRAIL		384 S. MILITARY TRAIL					
DEERFIELD BEACH FL 33442		DEERFIELD BEACH FL 3344	2				
US		US	US		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 02/04/1988		
· ·	Place of Business	2a. Mailing Address	Mailing Address		4. FEI Number	Applied For	
21		26			65-0142282	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country	•	8. This corporation owes or has paid the current year intangible		
24	25		30		Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
GOLDSTEIN, ARNOLD S			81	Name	√ame		
384 S. MILITARY TRAIL			82 Street Address (P.O. Box Number is Not Acceptable)				
DEERFIELD BEACH FL 33442							
			83				
			84	City		85 Zip Code	
					FL	<b>→</b>   <sup></sup>	
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, typed or printed name of registered agent and title if applicable. (NO			TE: Registered Agent signature req				
12.	PTD OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	· · -	L DELETE	1.1 TITLE			Change Addition	
NAME	GOLDSTEIN, ARNOLD S		1.2 NAME				
STREET ADDRESS			1.3 STREET ADDRESS				
CITY-ST-ZIP	DELRAY BEACH FL		1,4 C/TY-ST-Z/P				
TITLE	VD T DELETE		2.1 TITLE			Change Addition	
NAME	CHESLER, BARRY S		2.2 NAME			ĺ	
STREET ADDRESS 384 S. MILITARY TRAIL			2.3 STREET ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL		2.4 CITY-ST-ZIP				
TITLE	L_ DELETE		3.1 TITLE			Change Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	3.4 CITY-ST	-ZIP			
TITLE	DELETÉ		4.1 TITLE			Change Addition	
NAME			4.2 NAME	ļ			
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST	-ZIP			
TITLE		L DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST	-ZIP	<u> </u>		
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST				
14. I hereby certify that the information supplied with this filling 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 oath; 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.							