## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999

24



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

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## DOCUMENT # M85324

SUSAN ACKLEY ADVERTISING, INC.

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ACKLEY, SUSAN 4515 SW 68 CT CR

Principal Place of Business Mailing Address 4515 SW 68 CT CR 4515 SW 68 CT CR MIAMI FL 33155 **MIAMI FL 33155** 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 City & State City & State 23 28 Zip Country Zip Country

29

9. Name and Address of Current Registered Agent

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90141 007 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

Street Address (P.O. Box Number is Not Acceptable)

06/14/1988

59-2893458

4. FEI Number

MIAMI FL 33155			83				
			84	City	FL	85	Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 a registered agent, or both, in the State of F im familiar with, and accept the obligation	nd 607.1508, Florida Statute forida. Such change was au s of, Section 607.0505, Flor	es, the above thorized by rida Statutes	e-named corp the corporation	poration submits this statement for the purpose of con's board of directors. I hereby accept the appoin	hanging tment a	its registered s registered
SIGNATURE	Signature, typed or printed name of registered agent and						
12.	OFFICERS AND D		13.	it signature require	d when reinstating)  DATE  ADDITIONS CHANGES TO CELUSIANA		
TITLE	P	☐ DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND	~	
NAME	ACKLEY, SUSAN		1.2 NAME			☐ Chan	ge 🗌 Additio
STREET ADDRESS	4515 SW 68 CT CR #3			ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T-ZIP			
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NAME			2.2 NAME	1			,- 🗀
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TREET ADDRESS			3.3 STREET	Annece		_	
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AME		☐ NETELE		1	Ţ	_ Chang	e 🔲 Additio
REET ADDRESS			6.2 NAME				
			6.3 STREET				
TY-ST-ZIP	ertify that the information supplied with thing this annual report or supplemental and		6.4 CITY-ST-	ZIP			

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, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R2F034 (11/08)

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable