

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE
		Sandra B. Montem
		Secretary of State
		DIVISION OF CORPORATIONS

DOCUMENT # N96000005473

1. Corporation Name
INTERNATIONAL ADVERTISING ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2601 S. BAYSHORE DR. SUITE 600 MIAMI FL 33133	2601 S. BAYSHORE DR. SUITE 600 MIAMI FL 33133

FILED
95 JUL 26 AM 10:20

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/31/1994		3a. Date of Last Report	
4. FEI Number 65-0533645		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No		\$5.00 May Be Added to Fees	
21. Principal Place of Business	2a. Mailing Address	24. Zip	25. Country
22. Suite, Apt. # etc	26. Suite, Apt. #, etc	27. City & State	28. City & State
23. Zip	29. Zip	30. Country	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent											
HKS&F REGISTERED AGENT CORP. 2601 SOUTH BAYSHORE DR. SUITE 600 MIAMI FL 33133		<table border="1"> <tr> <td>81. Name</td> <td></td> </tr> <tr> <td>82. Street Address (P.O. Box Number is Not Acceptable)</td> <td></td> </tr> <tr> <td>83. City</td> <td></td> </tr> <tr> <td>84. State</td> <td>FL</td> </tr> <tr> <td>85. Zip Code</td> <td></td> </tr> </table>		81. Name		82. Street Address (P.O. Box Number is Not Acceptable)		83. City		84. State	FL	85. Zip Code	
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82. Street Address (P.O. Box Number is Not Acceptable)													
83. City													
84. State	FL												
85. Zip Code													

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]* **Vice President** **07/25/95**

12. OFFICERS AND DIRECTORS		13. ☐ Change ☐ Addition	
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY, ST, ZIP	CITY, ST, ZIP	CITY, ST, ZIP	CITY, ST, ZIP
DP	ANDERSON, MARK	21. TITLE	22. NAME
% 2601 S. BAYSHORE DR., SUITE 600	MIAMI FL 33133	23. STREET ADDRESS	24. CITY, ST, ZIP
D	PINEDA, RAMON J	25. TITLE	26. NAME
% 2601 S. BAYSHORE DR., SUITE 600	MIAMI FL 33133	27. STREET ADDRESS	28. CITY, ST, ZIP
DS	SIGARS, JANA	29. TITLE	30. NAME
% 2601 S. BAYSHORE DR., SUITE 600	MIAMI FL 33133	31. STREET ADDRESS	32. CITY, ST, ZIP
DT	COHORST, KEVIN	33. TITLE	34. NAME
% 2601 S. BAYSHORE DR., SUITE 600	MIAMI FL 33133	35. STREET ADDRESS	36. CITY, ST, ZIP
		37. TITLE	38. NAME
		39. STREET ADDRESS	40. CITY, ST, ZIP
		41. TITLE	42. NAME
		43. STREET ADDRESS	44. CITY, ST, ZIP
		45. TITLE	46. NAME
		47. STREET ADDRESS	48. CITY, ST, ZIP
		49. TITLE	50. NAME
		51. STREET ADDRESS	52. CITY, ST, ZIP

14. I hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of changes or on appointment with an address.

SIGNATURE: *[Signature]* **L. Jana Sigars** **07/25/95** **(305) 859-7700**

DATE: **07/25/95** TELEPHONE: **(305) 859-7700**

CR2E034 (3/95)