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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P25696

(6)

KEY GF	ROUP ADVERTISING, INC.							
Principal Plane of Business Mailing Address 523 S 8TH STREET 523 S 8TH STREET MINNEAPOLIS MN 55404 MINNEAPOLIS MN 55404-10					I PORCHORY HAR HIRE! DANIE CIVIE TORIO O	ITA BANDA DANAFA N	11 4 10 4 141 414 11	010H 1881
			-1030					
					3. Date Incorporated or Qualified		ate of Last R	eport
2 Denginal C	Race of Business	2a. Mailing Address			08/22/1989 4. FEI Number	U4/	26/1996	oplied For
2. Principal r	race of business	26			41-1341201		—— —	oplied For of Applicable
Sule, Apt	#, elc	Suile, Apt. #, etc.	····-				\$8.75	
22		27			5. Certificate of Status Desired		Fee Re	
City & Sta	te	City & State		**********	6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution		Added	lo Fees
Zip "	Country	Zip	Country	1	8. This corporation has liability for			. 199.032,
24	25	29	30			Yes		
	9, Name and Address of Curre		81	Name	10. Name and Address of New F	segistered	Agent	
	E PRENTICE-HALL CORPORATIO 11 HAYS STREET	n Stotem inc.	L					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	TE 105		82	Street Add	dress (P.O. Box Number is Not Accept	able)		
	LAHASSEE FL 32301		83	 				
in	TA Prooff 1 F offor		<u></u>	<u> </u>			·	
			84	City		FL	85 Zip	Code
	registered agent, or both, in the State am familiar with, and accept the oblig	uz and 607 1508, Florida Stat of Florida. Such change was pations of, Section 607.0505, I	utes, the abov s authorized b Florida Statute	e-named col y the corpora s.	rporation submits this statement for the ation's board of directors. I hereby according to the statement of the statement for the ation's board of directors.	ept the app	pointment as	registered
olfice or agent. 1: SIGNATURE	Societies injurind or provides and in grid reading OFFICERS AN	nest and rile if applicable. (NI ND DIRECTORS		ent signature req	jured when renstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	RS IN 12
SIGNATURE 12. THE	Sgrade righted or provides and the grade and an office RS AN	est and tile 1 app wable. (N	OTE Registered Ag 13.	ent signature requ	uved when reinstating) ADDITIONS/CHANGES TO OFF	DATE		
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19 0/(3)(f). 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 comporation or the receiver or trustee empoyered 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 ow an attachment with an address.

SIGNATURE:

FILED

Jan 30 1997 8:00am

Secretary of State