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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P31837

(8)

MEDIA PUBLICATIONS, INC.

FILED Mar 27 1997 8:00am Secretary of State

Principal Place of Business Mailing Address							#-#·· (##·
100 S. BISCAYNE BLVD SUITE 1200 100 S. BISCAYNE BLVD MIAMI FL 33131-2095 MIAMI FL 33131-2028			JITE 1200				
					3. Date Incorporated or Qualified 11/16/1990	3a. Date of Last F 04/24/1996	Report
2. Principa P	Place of Business	2a. Mailing Address			4. FEI Number	A	oplied For
21		26			65-0214151		ol Applicable
Suitc, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	4	Additional
22		27				Fee R	equired
City & Stat	0	City & State			6. Election Campaign Financing		May Be
23		28	0		Trust Fund Contribution		to Fees
Zip mm	Gountry	Zip	Country		8. This corporation has liability for	ntangibie tax under s] Yes □ No	199.032,
24	25] 9. Name and Address of Curre		30		Florida Statutes 10. Name and Address of New Re		
cΛí	DOSTONE, DEBRA WEISS	in negistered Agent	81	Name	(D. Haille Blid Address of New Ye	Biotolog Agolic	
	K, HANZMAN & PONCE & TUC	YED					
	S.E. 2ND STREET, SUITE 2800	NEN	82	Street	Address (P.O. Box Number is Not Acceptab	ie)	
	MI FL 33131		83				
mir.u	MI TL 30101						
			84	City		FL 85 Zip	Code
11 Presental	to the procesions of Sections 607 050	02 and 607 1508. Florida Statute	s the abov	-named	corporation submits this statement for the p		ts registered
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was a pations of, Section 607.0505, Flo	uthorized b rida Statute	the cores.	corporation submits this statement for the p poration's board of directors. I hereby accep	ot the appointment as	registered
SIGNATURE	Soprano Specia pontal name d'inspoletica sp					C (##	
40		ID DIRECTORS (NOTE	13.	ni signature	required when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTOR	25 IAI 22
12.	OFFICENS AN	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	Change	Addition
TILE	KRAM, MICHAEL	ELL DECTE	1		·	Cina-igo	
NAME	100 S. BISCAYNE BLVD., SUI	TF 1200	1.2 NAME	LDDDDCCC			
STREET ADDRESS	MIAMI FL		1.3 STREET				
CHY-ST 7#	8	DELETE	1.4 CITY - 5 2.1 TITLE	H-ZIP		☐ Change	Addition
	LEWIS, JEFFRY B	LJ DECEN	2.2 NAME			onenge	
NAME	515 POST OAK BLVD., #300			IDDDCCC	·		
STREET ADDRESS	HOUSTON TX		2.3 STREET				
CITY - ST - ZIP TITLE	V	DELETE	2. 4 CITY- 3.1 TITLE	31-417		Change	Addition
NAVE	ZEIGER, SCOTT	C) OFCUT	3.2 NAME			and omingo	tered . In an in the
STREET ADDRESS	515 POST OAK BLVD., SUITE	300	3.3 STREET	Anneree			
	HOUSTON TX		3.4. CITY~				
COLY - S1 - ZIP TIDLE	T	DEVETE	4.1 TITLE	01. t it		Change	Addition
NAM:	ZLOTNIK, ROBERT S		4. 2 NAME				
STREET ADOPTISM	515 POST OAK BLVD., SUITE	300	4.9 STREET	AUUBEGG			
OLLY - STE ZIP	HOUSTON TX		4.4 CITY-5				
70LF	D	DELETE	5.1 TITLE	, 1 - 4,11 		Change	Addition
NAV:	BECKER, ALLEN J		5.2 NAME			 •	
SISHELADDRESS	515 POST OAK BLVD.,, SUITE	300	5.3 STREET	ADDRESS			
CHY-ST ZIP	HOUSTON TX		5.4 CITY-3				
THE		☐ DELETE	6.1 TITLE	11.50		Change	Addition
			6.2 NAME				
NAM: minute apropes			6.3 STREET	ANNDERC			
SUBJECT ADDRESS			6.3 STREE				

14. Los hercoy 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 or an attachment when an address.

SIGNATURE:

2 20-97 713-693-8600