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

PROFIT CORFORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300020269 1. Corporation Name

GALAXY MEDIA, INC.

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

02-19-1999 90011 002 ***150.00



Principal Place of Business Mailing Address					" "			- + Industriary to desponsivity motive additionally additional state of the filling fi						
10314 N.W. 5TH ST. 10314 N.W. 5TH ST.														
PLANTATION FL 33324			PLANTATION FL 33324				ļ		50		-			
							3	Date Incorp			TE IN THIS	SPACE		
0.00								03/15/19	993	Qualifed				
2. Principal Place of Business 2a. Mailing Address					-1 101			4. FEI Number					Applied For	
21 1859 N. PINC TS/AND Rd 26 1859 N. PINE Suite Apt. #, etc.					e Island Rd			65-0404	<u>710 </u>				Not Applicable	
22 # 1	Suite, Apt. #, etc. 27 # 197/	•			5.	5. Certificate of Status Desired Fee Required								
	NTATION	City & State 28 PIANTATION FL				6.	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees							
Zip □ ファウ		untry	Zip		untry		8.	This corpor	ation owe	s the cum	ent year In	tangible		
24 333		USA	29 33322	30	ינט	5 A		Personal P				☐Yes	□No	
	9. Name and Ad	ddress of Current F	Registered Agent		81	Nema	10.	Name and	Address	of New R	legistered	Agent ·		
SPI	VACK, MARC L				81	Name		:						
	14 N.W. 5TH ST.				82	Street Ad	ddress (P	O. Box Nur	nber is No	t Accepta	able)			
	NTATION FL 3332	4						·						
		•			83							•		
					84	City						85 Zip	p Code	
44 Dureuant	to the province of (0		. 41	LЦ			· · · · · · · · · · · · · · · · · · ·			<u> </u>	_ '	•	
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SIGNATURE	<u> </u>													
12,	Signature, typed or printed n				Agent	t signature requ					DATE			
TITLE	D	OFFICERS AND	DELETE	13.				ADDITIONS/	CHANGE	S TO OFF	FICERS AN			
NAME	SPIVACK, MARC	٠,	- DESCRIC	1.1 111								☐ Change	e [] Addition	
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STREET ADDRESS						VDDRE\$\$								
CITY-ST-ZIP				6.4 CITY	Y-ST-7	ZIP								

I hereby certify that the information supplied with this filing 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 appears with all other like empowered.

SIGNATURE: