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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300031857 1. Corporation Name

FLORIDA RADIO REALTY, INC.

Principal Place	of Business	Mailing Address			,	
601 BRICKELL KEY DR. SUITE 507 MIAMI FL 33131		% IVAN A. GOMEZ. ESO. 601 BRICKELL KEY DR. SUITE 507 MIAMI FL 33131		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
US		US		04/30/1993		
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Appl	lied For
·	Davie Road	├─ c/ơ Ivan A	. Gomez	65-0418820		Applicable
Suite, Apt.		601 Brickell	Key Drive		\$8.75 Ac	fditional
22		27 Suite 507		5. Certificate of Status Desired	Fee Req	uired
City & State	В	City & State		6. Election Campaign Financing	\$5.00 №	· 1
23 Davi	e. Florida	28 Miami, Flor		Trust Fund Contribution	Added to	Fees
Zip Davi		Zip	Country	8. This corporation owes the current year In		X No
24 3 <u>331</u>		29 33131 30	USA	Personal Property Tax.		_ANO
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81. Name						
GOM	IEZ, IVAN A P.A.		Ivan	A. Gomez, P.A.		
	S.W. 3RD AVE.		82 Street Add	dress (P.O. Box Number is Not Acceptable) Brickell Key Drive		
	E 100		83	STICKETT REY DITVE		
1	AI FL 33129		Suite	507		
,,,,,	, 2 33 33		84 City Miami	EI	85 Zip Co	ode 131
office or re agent. I as	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligating the Comment of the	r Florida. Such change was autrons of, Section 607.0505, Florid	iorizeo byzine compura		~. <i>1</i>	12/49
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	☐ DELETE	1,1 TITLE	•	Change	Addition
NAME	PEDERSEN, DAVID A		1.2 NAME		,	
STREET ADDRESS	2700 DAVIE RD		1.3 STREET ADDRESS			
CITY- ST- ZIP	DAVIE FL 33314	<u> </u>	1,4 CITY-ST-ZIP	100.	Chassa	☐ Addition
TITLE	D	☐ DELETE	2.1 TITLE	•	☐ Change	☐ Addition
NAME	Pudsey, Richard F		2.2 NAME			
STREET ADDRESS	2700 DAVIE RD		2.3 STREET ADDRESS		, ,,,,,,,,,,	,
CITY-ST-ZIP	DAVIE FL 33314	[] oci ete	2.4 CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , ,	Change	Addition
TITLE		☐ DELETE	3.1 TITLE		onungo	
NAME			3.2 NAME	•		
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change	Addition
TITLE		_ occere	4.2 NAME			
NAME STREET ADDRESS			4.2 TOAME 4.3 STREET ADDRESS			
STREET ADDRESS			4 4 CITY-ST-ZIP	-		
CITY-ST-ZIP		□ DELETE	5.1 TITLE		Change	Addition

CITY-ST-ZIP 14. 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 chapter for one an attachment path and other like empowered.

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

54 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY ST-ZIP

☐ DELETE

Date

Daytime Phone #

☐ Addition