

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000032449 (9)

1. Corporation Name

TRUE MEDIA, INC.



Principal Place of Business

4690 LIPSCOMB ST. NE
SUITE 7
PALM BAY FL 32905
US

Mailing Address

4690 LIPSCOMB ST. NE
SUITE 7
PALM BAY FL 32905
US

3. Date Incorporated or Qualified
05/03/1993

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

59-3183822

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LAMMERS, JEFFREY
3901 MAY LANE
MALABAR FL 32950

10. Name and Address of New Registered Agent

81 Name

CARTAINO, ROBERT

82 Street Address (P.O. Box Number is Not Acceptable)

754 ALTONA STREET NW

83

84 City

PALM BAY

FL

85 Zip Code

32907

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 typed or printed name of the individual agent or director, as applicable

Signature typed or printed name of the individual agent or director, as applicable

4/19/96

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
LAMMERS, JEFFREY J
3901 MAY LN
MALABAR FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
LEPPEK, PAUL
180 TEQUESTA DR
MERRITT ISLAND FL 32952

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
CARTAINO, ROBERT
754 ALTONA STREET NW
PALM BAY FL 32907

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, with an attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96

407-722-3150

CR2E034 (12/95)