

FILE NOW: FILING FEE AFTER MAY 1 IS \$550

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT
Sandra S. North
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000033415 (9)

1. Corporation Name
CL & B ADVERTISING GROUP, INC.

Principal Place of Business
2701 PONCE DE LEON BLVD
SUITE 202
CORAL GABLES FL 33134
US

Mailing Address
2701 PONCE DE LEON BLVD
SUITE 202
CORAL GABLES FL 33134-6020
US

3. Date Incorporated or Qualified 05/06/1993
3a. Date of Last Report 08/02/1996

2. Principal Place of Business
21 2701 PONCE DE LEON BLVD.
Suite, Apt. #, etc.

2a. Mailing Address
26 2701 PONCE DE LEON BLVD.
Suite, Apt. #, etc.

22 202
City & State

27 202
City & State

23 CORAL GABLES, FL
Zip Country

28 CORAL GABLES, FL
Zip Country

24 33134 25 U.S.A.

29 33134 30 U.S.A.

4. FEI Number 65-0426370
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

10. Name and Address of New Registered Agent

LONGAS DORA LUZ
13778 SW 145 STREET
MIAMI FL 33186

81 Name DORA LUZ LONGAS
82 Street Address (P.O. Box Number is Not Acceptable) 13778 SW 145 ST.
83 Miami FL
84 City FL 85 Zip Code 33186

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 *Dora Luz Longas* DATE 5/12/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☒ DELETE
NAME BOTERO, WILLIAM
STREET ADDRESS 9901 W. CALUSA CLUB DR
CITY-ST-ZIP MIAMI FL

1.1 TITLE S. ☒ Change ☐ Addition
1.2 NAME William Castano
1.3 STREET ADDRESS 13778 SW 145 St.
1.4 CITY-ST-ZIP Miami, FL 33186

TITLE P ☐ DELETE
NAME LONGAS DORA LUZ
STREET ADDRESS 13778 SW 145 STREET
CITY-ST-ZIP MIAMI FL

2.1 TITLE P ☐ Change ☐ Addition
2.2 NAME LONGAS DORA LUZ
2.3 STREET ADDRESS 13778 SW 145 St.
2.4 CITY-ST-ZIP Miami FL 33186

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 attachment with an address.

SIGNATURE *Dora Luz Longas*

FILED
Jun 12 1997 8:00am
Secretary of State



CR2E034 (9/96)