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

PROFIT CORPORATION ANNUAL REPORT

1998

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CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000033415 (9)

C L & B ADVERTISING GROUP, INC. Principal Place of Business Mailing Address 2701 PONCE DE LEON BLVD 2701 PONCE DE LEON BLVD SUITE 202 SUITE 202 DO NOT WRITE IN THIS SPACE **CORAL GABLES FL 33134** CORAL GABLES FL 33134 3. Date Incorporated or Qualified 05/06/1993 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 65-0426370 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 LONGAS DORA LUZ astano, WILLIAM 13778 SW 145 STREET Street Address (P.O. Box Number is Not Acceptable) 62 **MIAMI FL 33186** 83 84 City Zip Code 33186 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-narried 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 607.0506. Florida Statutes. William Gostano 031698 signature required when reinstating) Signature, typed or printed name of registered agent and little if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13 **X** DELET**E** Change Addition TITLE 1.1 TITLE CASTANO, WILLIAM 13778 S.W. 145 ST CASTANO, WILLIAM NAME 1.2 NAME 13778 S.W. 145 ST STREET ADDRESS 1.3 STREET ADDRESS HIAHI FL MIAMI FL CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Addition SUNGAS DOPA WZ TITLE 2.1 TITLE LONGAS DORA LUZ NAME 13778 SW 14551. 13778 SW 145 STREET STREET ADDRESS 2.3 STREET ADDRESS HIAM; FL MIAMI FL 2.4 CITY+ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 T/TLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIP DELETE Addition 4.1 TATLE TITLE MME NAME REET ADDRESS STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 THE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change 6.1 TITLE Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 of trus pe enhowered 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 attrichment with an address.

6.4 CITY - ST-ZIP

FILED

Mar 26 1998 8:00am

Secretary of State