

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 # P93000034309 (3)

1. Corporation Name

SOUTHLAND ADVERTISING SOUTH, INC.



Principal Place of Business

1975 EAST SUNRISE BLVD.
SUITE 800
FT. LAUDERDALE FL 33304
US

Mailing Address

1975 EAST SUNRISE BLVD.
SUITE 800
FT. LAUDERDALE FL 33304
US

3. Date Incorporated or Qualified

05/06/1993

3a. Date of Last Report

06/13/1995

2. Principal Place of Business

2a. Mailing Address

21 1975 E Sunrise Blvd
Suite, Apt. #, etc. Suite 800

26 1975 E Sunrise Blvd
Suite, Apt. #, etc. Suite # 800

22 City & State FL FL

27 City & State FL FL

23 Zip 33304 Country US

28 Zip 33304 Country US

24 33304 25 US

29 33304 30 US

4. FEI Number

65-0413565

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

COLBURN, HARRY S JR
321 ROYAL POINCIANA PLAZA
PALM BEACH FL 33480

81 Name

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

83

84 City

FL

85 Zip Code

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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PCEO / president
NAME CHIAVAROLI, WARREN J
STREET ADDRESS STE 501 1975 E SUNRISE BLVD
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE VP
NAME BAKER, DUDLEY T
STREET ADDRESS STE 501 1975 E SUNRISE BLVD
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)