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

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCLIMENT #

D00000005100 (c)

1. Corporation	RAY BROADCASTING COM	190035 190 (6)			
Principal Place of Business Mail		Maling Address			#111 #8111 #6168 111#1 #1181 [[818 {8111 #6](  881
WENG WENG					
BOX 2908 ENGLEWOOD FL 34295 US  2. Principal Place of Business  2a. Mailing Address				L	·
				3. Date Incorporated or Qualified	3a. Date of Last Report
			05/13/1993 4. Et Number	05/01/1995 Applied For	
2, Frincipa Fia 21	ace of business	26 26		58-2053801	Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Cartinicate of Status Desired	Fee Required
Orty & State	:	City & State		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	[28] Zip	Country	Trust Fund Contribution  8. This corporation has liability for	Added to rees
24	25	29 30	¬ ′		s DNo
	9 Name and Address of Currer	and the contract of the contra		10. Name and Address of New I	Registered Agent
			81 Name		
Christiansen & Dehner, P.A.			82 Street Add	ress (P.O. Box Number is Not Accepta	ble)
2975 BEE RIDGE RD.			83		
SUITE			163		
SANA	SOTA FL 34239		84 City		85 Zip Code
SIGNATURE 12.	Signature typed or printed name of registered agen OF FICERS AN	t and title it applicable (NOTE RE ID DIRECTORS	egistered Agard signature require		DATE FIGERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME	MURRAY, JOHN H		1.2 NAME		
STREET ADDRESS	10 BAKER CT		1 3 STREET ADDRESS		
C-TY-ST-Z-P TITLE	RAMSEY NJ ST	DELETE	14 GHY+S1+ZIP 2 1 TITLE		Change Addition
NAME	MURRAY, BEVERLY B	Ľ	2 2 NAME		
STREET ADDRESS	10 BAKER CT		2.3 STREET ADDRESS		
CITY - S1 - 712	RAMSEY NJ		2.4 CITY - ST - ZIP		
THUE		☐ DELĒTE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS  CITY+ST- ZIP			3.3 STREET ADDRESS 3.4 City-S1-Zip		
TITLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		D BELLEY	44 CITY - ST-ZIP		[] Charter [] 4200
TITLE		DELÉTE.	5 1 TIFLE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CHY-ST-ZIP		
TILF		DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
SIREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIF			6.4 C(TY+S1+Z)P		

14. To 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 logal effect as if made under eath; 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:

Mulay JOHN H, MURRAY

941-474-3231