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FILED

May 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000081542 (1)

1. Corporation Name

PSYCHIC DISCOVERY NETWORK, INC.



Principal Place of Business

1499 WEST PALMETTO PARK RD.  
SUITE 322  
BOCA RATON FL 33486

Mailing Address

1499 WEST PALMETTO PARK RD.  
SUITE 322  
BOCA RATON FL 33486-3323

2. Principal Place of Business

21 676 S. Military Trail  
Suite, Apt. #, etc.

22 bldg 2  
City & State

23 Deerfield Bch, FL  
Zip Country

24 33442  
25

2a. Mailing Address

26 676 S. Military Tr.  
Suite, Apt. #, etc.

27 bldg. 2.  
City & State

28 Deerfield Bch, FL  
Zip Country

29 33442  
30

3. Date Incorporated or Qualified

11/29/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0477696

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

BLODIG, GREGORY J  
1630 NORTH FEDERAL HWY  
FORT LAUDERDALE FL 32301

10. Name and Address of New Registered Agent

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 D  
NAME ANJOLI, EDWARD  
STREET ADDRESS 1499 W. PALMETTO PARK RD, STE 110  
CITY-ST-ZIP BOCA RATON FL ☒ DELETE

TITLE D  
NAME RUSSELL, DAVID  
STREET ADDRESS 1499 W. PALMETTO PARK RD, STE 310  
CITY-ST-ZIP BOCA RATON FL ☒ DELETE

TITLE P  
NAME PEPLIN, RICHARD C JR.  
STREET ADDRESS 1499 W. PALMETTO PARK RD #310  
CITY-ST-ZIP BOCA RATON FL ☐ 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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.

Richard C. Peplin Jr.

Pres.

CR2E034 (9/96)