FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Mar 17 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 #P93000081839 (1)

1. Corporation Name

FORECLOSURE MAGAZINE INC.

Principal Place of Business	Mailing Address
153 E. PALMETTO PARK ROAD #186 BOCA RATON, FL 33432	153 E PALMETTO PARK RD. #186 BOCA RATON, FL 33432

3. Date Incorporated or Qualified: 11/29/1993
3a. Date of Last Report: 07/12/96

2. Principal Place of Business
21 4800 N. FEDERAL HWY.
Suite, Apt. #, etc.
22 302E
City & State
23 BOCA RATON, FL
Zip 24 33431 Country 25

2a. Mailing Address
26 4800 N. FEDERAL HWY.
Suite, Apt. #, etc.
27 302E
City & State
28 BOCA RATON, FL
Zip 29 33431 Country 30

4. FEI Number ~~65-0656291~~ 65-0451236 ☐ 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

GREGORIOU, LAURIE
153 E. PALMETTO PARK ROAD
#186
BOCA RATON, FL 33432

10. Name and Address of New Registered Agent

81 Name: TURESKY, SANDRA
82 Street Address (P.O. Box Number is Not Acceptable): 4800 N. FEDERAL HWY.
83: #302E
84 City: BOCA RATON, FL 85 Zip Code: 33431

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: Sandra Turesky — Sandra Turesky, Pres. — 3/10/97
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GREGORIOU, L. 153 E. PALMETTO PARK ROAD, #186 BOCA ARTON, FL 33432	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PST TURESKY, SANDRA 2223 NW 52nd Street BOCA RATON, FL 33496	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

700002117297
-03/18/97--01112--017
***173.75

CR2E034 (9/96)

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: Sandra Turesky — Sandra Turesky, Pres. — 3/10/97 — 561-347-1432
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #