FILE NOW: FILING FEE AFTER MAY 1 IS \$55000

PROFIT **CORPORATION** ANNUAL REPORT 1997



FLORIDA DEPARTMENT

Secretary of Sta

DIVISION OF CORPOR HONS

DOCUMENT # P93000087704 (1)

COMMUNICATION STATIONS OF SOUTH FLORIDA, INC.

Principal Place of Business 8278 NO. FEDERAL HIGHWAY FT. LAUDERDALE FL 33308

Mailing Address

8220 STATE RD 84 SUITE 301

FILED

Apr 24 1997 8:00am

Secretary of State

		DAVIE FL 33324-4625 US	ţ		3. Date Incorporated or Qualified 12/22/1993	3a. Date of 05/29/19		
2. Principal Place of Business		2a. Mailing Address	a. Mailing Address		4. FEI Number		Applied For	
11		26			65-0456266		Not Applicable	
2	Suite, Apt. #, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired		.75 Additional ee Required	
:3	City & State	City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees	
_	Zip Country	Zip	Count	У	8. This corporation has liability for i	ntangible tax ur	nder s. 199.032,	
4	25	29	30		Florida Statutes	Yes No		
	Name and Address of Curren	nt Registered Agent		10. Name and Address of New Registered Agent				
	REY, FERNANDO		8	Name				
	8220 STATE RD 84 SUITE 301			Street Add	treet Address (P.O. Box Number is Not Acceptable)			
	DAVIE FL 33324		8:	3				
			8	1 City		FL 85	Zip Code	
11	 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State 	2 and 607,1508, Florida S of Florida, Such change v	tatutes, the aboves authorized b	ve-named cor by the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	urpose of chan	ging its registered ent as registered	

agontina	an laminar with, and accept the ornigitions of	, 0000001 007.0000, 110	nda Olaldica,			
SIGNATURE	Signature, typed or printed name of registered agent and title	il angle able (NOTE	. Registored Agent signature requi	uired whon reinstating) DATE		
12.	OFFICERS AND DIREC	· 	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE		Addition	
NAME	RASH, JACKSON D		1.2 NAME			
STREET ADDRESS	1007 N. FEDERAL HWY.		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33015		1.4 CHV-ST-7IP			
TITLE	VP	DELFTE	2.1 111LE	Change	Addition	
NAME	REY, FERNANDO		2.2 NAME			
STREET ADDRESS	101 BRINY AVE. #211.		2.3 STREET ADDRESS			
CITY-ST-ZIP	POMPANO BEACH FL 33062		2 4 CITY - ST - ZIP			
TITLE	VP	DELETE	3 1 TITLE	☐ Change ☐ /	Addition	
NAME	HEFFLEY, ALBERT		3.2 NAME			
STREET ADDRESS	2166 NW 99 WAY		3.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33071		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	Change	Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 T(F)(F)	Change/	Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE1 ADDRESS			
CITY-ST-ZIP			5 4 CHTY - \$1 - ZIP			
TITLE		☐ DELETE	61 TITLE	☐ Change ☐ /	Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREFT ADDRESS			

14. To 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 true tempowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed upon an attachment with in address

SIGNATURE:

4/18/97

954-473-89/1

SIGNATURE:

4/18/97

954-472-8911