

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY 25 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000012781 (8)

1. Corporation Name

MEDIA LAND CORP.

Principal Place of Business

3530 FIRST AVE. NORTH
SUITE 116
ST. PETERSBURG FL 33713

Mailing Address

3530 FIRST AVE. NORTH
SUITE 116
ST. PETERSBURG FL 33713

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report

02/16/1994

4. FEI Number

☒ 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. 189.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

10. Name and Address of New Registered Agent

81 Name WERNER, SIDNEY

82 Street Address (P.O. Box Number is Not Acceptable)
5720 Central Avenue

83

84 City St. Petersburg, FL 85 Zip Code 33707

MOSLEY, H L
3530 1ST AVENUE NORTH
SUITE 116
ST. PETERSBURG FL 33713

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

Sidney Werner
Signature of person of principal name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

5/22/95

12. OFFICERS AND DIRECTORS

TITLE D
NAME MOSLEY, H L
STREET ADDRESS 3530 1ST AVE NORTH, STE. 116
CITY - ST - ZIP ST PETERSBURG FL 33713

TITLE D
NAME JOERSS, ANASTASIA
STREET ADDRESS 3530 1ST AVE NORTH, STE. 116
CITY - ST - ZIP ST PETERSBURG FL 33713

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE PD
1.2 NAME KOLP, ELI
1.3 STREET ADDRESS 3401 Burlington Wood Court
1.4 CITY - ST - ZIP Lutz, Florida 33549

2.1 TITLE VPD
2.2 NAME FRIEDMAN, GERALD
2.3 STREET ADDRESS 3530-1st Ave. No., #116
2.4 CITY - ST - ZIP St. Petersburg, FL 33713

3.1 TITLE STD
3.2 NAME JOERSS, ANASTASIA
3.3 STREET ADDRESS 3530-1st Ave. No., #116
3.4 CITY - ST - ZIP St. Petersburg, FL 33713

4.1 TITLE 2VPD
4.2 NAME MOSLEY, H. L.
4.3 STREET ADDRESS 3530-1st Ave. No., #116
4.4 CITY - ST - ZIP St. Petersburg, FL 33713

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 007, 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

GERALD FRIEDMAN

DATE

7/24/95

DEPT. PHONE #

813-321-8188