FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OOCUMENT # P94000016939 Corporation Name

POPULAR PRESS, INC.

rinci	pal Place	of Business
ecc i	DICCAVAIC	DLVD

Mailing Address

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90085 015 ***150.00



55 BISCAYNE BLVD TE 760 Mami FL 33181		12555 BISCAYNE BLVD SUITE 760 N MIAMI FL 33181			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
Principal F	Place of Business	2a. Mailing Address				02/28/1994 4. FEI Number			Applied For
Suite, Apt	# etc	26				65-0477724			vot Applicable
		Suite, Apt. #, etc.				5. Certifcate of Status D	esired	•	Additional Required
City & Sta	te	City & State				6. Election Campaign Fi	– 1 3		May Be
Zip	Country	Zip	Cou	intry					to Fees
25		29 30		8. This corporation owes the current year Intangible Personal Property Tax.					
	9. Name and Address of Current	Registered Agent				10. Name and Address		-	
WUI	TE DICHADO M ID			81	Name				
	te, richard M Jr.) n Kendall dr			82	Street Add	dress (P.O. Box Number is No	t Acceptable)		7.44.1
SUIT	E 100			83					
MIAIN	MI FL 33156			83					
			ľ	84	City		FL	85 Zip	Code
	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	la Statu	ites.	ne corporat	ion's board of directors. There	t for the purpose of by accept the appo	changing it intment as r	s registered egistered
	Signature, typed or printed name of registered agent a OFFICERS AND			Agent :	signature requir	ed when reinstating)	DATE		
	D OFFICERS AND	DELETE	13.		1	ADDITIONS/CHANGES	TO OFFICERS AN		
.	BORGER, LEONARD	□ occeie	1.1 TM					☐ Change	☐ Addition
ET ADDRESS	12555 BISCAYNE BLVD #760		1.2 NA		DDDEGG				
ST-ZIP	N MIAMI FL 33181		P		DDRESS				
	D	☐ DELETE	1.4 CIT 2.1 TITL		ZIP			☐ Change	☐ Addition
	BORGER, JUDY	_	2.2 NAN		İ			☐ Change	☐ Addition
ET ADDRESS	12555 BISCAYNE BLVD #760			_	DORESS				
ST-ZIP	N MIAMI FL 33181		2. 4 CIT		- 1	,			i
		☐ DELETE	3.1 TITL		-	1		☐ Change	Addition
: i			3.2 NAM	Æ			·		
ET ADDRESS			3.3 STR	REETA	DDRESS				
ST-ZIP			3.4. CIT	Y-ST-	ZIP				
		☐ DELETE	4.1 TITL	Ε				Change	Addition
Ì			4. 2 NAA	ME					
TADORESS			4.3 STR	EET AL	DDRESS				,
ST-ZIP			4.4 CITY		IP				
		☐ DELETÉ	5.1 TITL			•		☐ Change	Addition
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TADORESS			5.3 STRI		- 1				ļ
ST-ZIP		☐ DÉLETE	5.4 CITY 6.1 TITLE		3P				
1		r⊓ n¢reie						Change	☐ Addition
TADDRESS			6.2 NAMI 6.3 STRE		nnpeee				
T-ZIP					1			•	
			6.4 CITY	-31•ZI	ir i				

Thereby 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, with all other like empowered.

GNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR