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

DOCUMENT # **P94000028038**1. Corporation Name

AXISS ADVERTISING, INC.

Principal Place of Business

2100 PONCE DE LEON BLVD

Mailing Address

2100 PONÇE DE LEON BLVD

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90174 026 ***150.00



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76		DO NOT WRITE IN THIS SPACE			
US	U\$		3. Date Incorporated or Qualifed 04/11/1994		
2. Principal Place of Business 21 2100 Pouce De Leon Blod	2a. Mailing Address 26 2100 Pouce Re	lear And	4. FEI Number 65-0483757	Applied For Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 Coral Gables, FL	City & State 28 Coval Gables, F	L	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 24 33134 25	Zip Cour 29 33134 30	ntry	This corporation owes the current year I Personal Property Tax.	ntangible □ Yes □ No	
9. Name and Address of Curren	10. Name and Address of New Registere	d Agent			
		81 Name C 82 Street Addres	HARLOTTE SEGR SE (P.O. Box Number is Not Acceptable) SANTA CRUZ AU	<u>٤</u>	
SUITE 403 CORAL GABLES FL 33134		83			
		-	i GABLES F		
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State of the section of the sec	of Florida. Such change was authorized	by the corporation	ration submits this statement for the purpose or 's board of directors. I hereby accept the app	of changing its registered ointment as registered	

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	13.	ADDITIONS/CHANGES TO OFFICERS AN						
TITLE	DPST □ DELETE	1.1 TITLE		Change	☐ Addition				
NAME	SEGRE, CHARLOTTE A	12 NAME	SEGRE, CHORLOTTE B. 1417 SANTA CRUZ DUE						
STREET ADDRESS	427 SANTANDER AVE	1.3 STREET ADDRESS		•	{				
CITY-ST-ZIP	CORAL GABLES FL 33134	1.4 CITY-ST-ZIP	CORDL GABLES, FL 3313						
TITLE	☐ DELETE	2.1 TITLE		☐ Change	Addition				
NAME		2.2 NAME	-						
STREET ADDRESS		2.3 STREET ADDRESS	The second was a second of the second						
CITY-ST-ZIP		2.4 CITY-ST-ZIP	·						
TITLE	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition				
NAME		3.2 NAME							
STREET ADDRESS		3.3 STREET ADDRESS			ļ				
CITY-ST-ZIP		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 TITLE		Change	Addition				
NAME		52 NAME							
STREET ADDRESS		5.3 STREET ADDRESS			.				
CITY-ST-ZIP		5.4 CITY-ST-ZIP							
TITLE	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition				
NAME		6.2 NAME							
STREET ADDRESS		6.3 STREET ADDRESS		•					
CITY-ST-ZIP		6.4 CITY-ST-ZIP	die Costine (40 07/2VI). Florido Statutos 1 fuebos co						

14. I 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, with all other like empowered.