

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # **P94000030476 (3)**

1. Corporation Name

COAST TO COAST DIRECT, INC.



Principal Place of Business

**3050 BISCAYNE BLVD.
SUITE 700
MIAMI FL 33137**

Mailing Address

**3050 BISCAYNE BLVD.
SUITE 700
MIAMI FL 33137**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

3. Date Incorporated or Qualified
04/20/1994

3a. Date of Last Report
10/05/1995

4. FEI Number
65-0495136

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

10. Name and Address of New Registered Agent

**OWAGHTEN, JUAN T
2005 S. BAYSHORE DRIVE
SUITE 1100
MIAMI FL 33138**

81 Name **David E. Marko, Esq.**
82 Street Address (P.O. Box Number is Not Acceptable)
One Biscayne Tower, Suite 2600
83 **2 S. Biscayne Blvd.**
84 City **Miami** FL 85 Zip Code **33131**

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 607.0508, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	MELTZER, BARRY	3050 BISCAYNE BLVD., SUITE 700	MIAMI FL 33137	<input type="checkbox"/>
Y	MCDONALD, MATTHEW	3050 BISCAYNE BLVD., SUITE 701	MIAMI FL 33137	<input checked="" type="checkbox"/>
S	TIFFANY, SUSAN	3050 BISCAYNE BLVD., SUITE 702	MIAMI FL 33137	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
P	Meltzer, Barry	3050 Biscayne Blvd., Suite 700	Miami, FL 33137	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CEO	Galpern, David H.	3050 Biscayne Blvd, Suite 700	Miami, FL 33137	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T	Eby, Dale	3050 Biscayne Blvd, Suite 700	Miami, FL 33137	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S	Fisher, Jann	3050 Biscayne Blvd., Suite 700	Miami, FL 33137	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Jann I. Fisher, Secretary**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.29.96

Date

305/573-2900

Daytime Phone #

CR2E034 (12/95)