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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # P94000041846 (4)

ADVANTAGE TAPE, INC.

Principal Place of Business Mailing Address 10740 N. 56TH ST. 10740 N. 56TH						
SUITE 163		SUITE 163				
TAMPA FL 336	7	TAMPA FL 33617-3615			3. Date Incorporated or Qualified 05/24/1994	3a. Date of Last Report 05/01/1996
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEt Number 59-3258246	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Z ₁ p	Country 25	Ζφ 29	Countr 30	у	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes \textstyle No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent
	NGLER, CHARLES H		81	Name		
10740 N 56TH ST. SUTIE 163 TAMPA FL 33617			83	Street Address (P.O. Box Number is Not Acceptable)		
			83	3		
•			84	City		FL 85 Zip Code
11. Pursuant office or a agent. La	to the provisions of Sections 607.0502 egistered agent, or both, in the State om Immiliar with, and accept the obliga	and 607.1508, Florida Sta of Florida Such change water ons of, Section 607.0505,	tutes, the about as authorized b Florida Statute	re-named cor by the corpora es.	poration submits this statement for the pation's board of directors. I hereby acceptions	urpose of changing its registered at the appointment as registered
SIGNATURE	Charles 17. Sp	angler				2/24/97
12,	Signer is the color printed name of registerup after OFFICERS AND		OTE Registered A	geni signalure requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
Tille	DPVS	DELETE	1.1 TITLE		7,5517,6167,6157,625 10 01116	Change Addition
NAME	SPANGLER, CHARLES H		1.2 NAME]		
STHEET ADDRESS	10740 N. 56TH ST., SUITE 163		1.3 STREE	T ADDRESS		
CITY-SI-ZP	TAMPA FL 33617		14 City -	ST-ZIP		1
TiTLE		DELETE	2.1 TITLE			Change Addition
NAME	2.		2.2 NAME			
STREET ADORESS			2.3 STREE	T ADDRESS		į
CITY-ST ZIF			2. 4 CITY	-ST-ZIP		
TITLE		☐ DELETE	31 TITLE			Change Addition
NAME:			3.2 NAME			
STREET ADURESS			3.3 STREE	T ADDRESS		
Cily - SI - ZIP		T Dr. CZE	3.4. CITY			
TITLE		☐ DELETE	4.1 TRILE			☐ Change ☐ Addition
NAME			4. 2 NAM			
STREET ADDRESS				T ADDRESS		
City-SI-719		DELETE	4.4 CITY-	ST-ZIP		Change Addition
TITLE		FTT DEFEIG	5 1 TITLE	1		Fin enduling Fin wagings (
NAME Outpoor Advisorus			5.2 NAME	· · · · · · · · · · · · · · · · · · ·		
STREET ADORESS				T ADDRESS		
CHY-ST-ZIP TULE		DELETE	5.4 CITY - 6.1 TITLE	SI-ZIP		Change Addition
]		L) Dittil	6.2 NAME			C Outside C vocation
NAME DEGET ADDATES						
STREET ADDRESS				T ADDRESS		
CHY+S1+7IF			6.4 CiTY-	\$1-7IP		

14. I do 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 eath; 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