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

PROFIT CORPORATION ANNUAL REPORT



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

	1996	
DOCU 1. Corpora	JMENT tion Name	#

P94000042729 (1)

MEDIAMAKERS, INC.

Principal Place	e of Business	Mailing Address		I MASKESI NE IBIN DIBIN DENI DEN	(1 661% 661% 61616 WEIL 16616 11616 1511 1551
2100 S.E. 11 SUITE 601 OGALA FL 3		2100 S.E. 17TH STR Suite 601 Ocala Fl. 34471	REET		
				3. Date incorporated or Qualified 05/27/1994	3a. Date of Last Report 04/24/1995
	ace of Business	2a. Mailing Address		4. FEt Number	Applied For
21		26	The second secon	59-3248813	Not Applicable
Suite. Apt.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7ip	Country	8. This corporation has liability for	
24	25	29	30	· · · · · · · · · · · · · · · · · · ·	No
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New I	Registered Agent
			81 Name		
YANKEELOV, DAWN M 82 Street Ac		82 Street Add	dress (P.O. Box Number is Not Acceptal	ble)	
	W 41ST ST. APT. 2913 FL 34474		83	<u></u>	
OUNLA	FL 34414				
			84 City		FL 85 Zip Code
				oration submits this statement for the pu and of directors. Thereby accept the app	
familiar wi	th, and a coopt the obligations of	Section 607.0505, Florida Statut	68	~ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Johnnett as registered agent Tam
SIGNATURE .	Synut Hypert or positive name of report ref	average the happing the	on M. Yanke Wite Bajatan Anno sanar ng rena	elov Prosident	4-24-96
12.	OFFICE AS	AND DIRECTORS	13.	The second state of the second	FICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.11016		Change Addition
NAME	YANKEELOV, DAWN M		1.2 NAME		
STREET ADDRESS	2901 SW 41ST ST. APT.	2913	1.3 STHEET ADDRESS		
CITY - ST - ZIP	OCALA FL 34474		1.4 Cily - \$1 - 7iP		
TITLE		□ DELETE	2 1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		[] DELETE	2.4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		L 2000 10	3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
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 Tille		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STHEFT ADDRESS		
CITY - ST - ZIF			5.4 CiTy - ST - 7IP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			64 CHY+SE 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 logal 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.

SIGNATURE:

Jan M. Yalala Dawn M. Yankeelov, Fros. 4-24-96 04/11/0 SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)