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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000047370 (9)

DUNBAR	TELEVISION CORPOR										
Principal Place	of Business	Mailing Addres	SS		T VERNIERE TIM TRESI BIRIT MRIES BRITE RRAVI	I BARKI OKOKI KODOO IKUII KOOKK OOKI IJOI					
72 DUNBAR RO PALM BEACH G	DAD Bardens fl 33410	72 DUNBAR ROAD PALM BEACH GARDENS FL 33418-6829									
		·			3. Date incorporated or Qualified 06/24/1994	3a. Date of Last Report 02/26/1996					
2. Principal Pla	ace of Business	2a. Mailing Add	dress		4. FEI Number	Applied For					
21		26			65-0531914	Not Applica					
Sulte, Apt. #	ŧ, etc.	Suite, Apt. i	Ħ, 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					
Zip 24	Country 25	Zip 29	Coun	try	8. This corporation has liability for in	ntangible tax under s. 199.032,] Yes □ □ No					
[24]	g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
1200	CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324					CHMAW					

FILED Feb 10 1997 8:00am Secretary of State



Applied For Not Applicable \$8.75 Additional

1200 S. PINE ISLAND HOAD PLANTATION FL 33324			Street Address (2.0. Box Number is Not Acceptable) 72 DUNBAR (2000)							
	••••		83							
			84	Cily	5 /	D.			85 Zip	Code ()
				Į.	rim	Beac	4 look	DENS	خ s " FL	418
office or re agent, I a	to the provisions of Sections 607 0502 and 607 1500 egistered agent) or both in the State of Torida Suc m familiar with and accept the obligations of Section	8, Florida Statules, th change was auti on 607.0505, Florid	the above norized by la Statutes				s statement ctors. I hereb	or the purpos y accept the	ose of changing if e appointment as	s registered registered
SIGNATURE	All In 1	11CH AEL	Μ.	Tuc	HMA	$\boldsymbol{\omega}$		2 3	144	
	Signature, typed or printed name of registered agent and title if applica	ble (NOTE 形	r	nt signature	required when	renstating)		D	ATE	
12.	OFFICERS AND DIRECTORS	DELFTE	13.			ADDITIONS/C	CHANGES TO	OFFICERS	S AND DIRECTOR Change	S IN 12 Addition
TITLE	TUCHMAN, MICHAEL M	L. Detrie	1.1 TITLE	ľ					L_J Change	L_1 Abdition
NAME	72 DUNBAR ROAD		1.2 NAME	*000000						ĺ
STREET ADDRESS	PALM BEACH GARDENS FL 33410		1.3 STREET	i						
CITY-ST-ZIP TITLE	TACH DENOTI WHILE TE COTTO	T DELETE	1.4 CITY - S 2.1 TITLE	1-54.				····-	Change	Addition
NAME			22 NAME	ĺ						
STREET ADDRESS			2.3 STREET	ADDRESS						
CITY-ST-ZIP			2.4 CITY - S							
TITLE		DELETE	3.1 TILLE						Change	Addition
NAME			3.2 NAME						_	
STREET ADDRESS			3 3 STHEET	ADDRESS						
CITY-ST-ZIP			3.4. CITY - S	1-ZIP						
TITLE		DELETE	4.1 TITLE						Change	Addition
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET	ADDRESS						
CITY-ST-ZIP			4.4 CHY-S	1 - ZIP						
TITLE		DELETE	51 THLE	i					☐ Change	Addition
NAME			5 2 NAME							
STREET ADDRESS			5.3 STREET	ADDRESS						
CITY-ST-ZIP			5.4 CITY - S	T- 21P						
TITLE		DELETE	6.1 TITLE	- 1					Change	☐ Addition
NAME			6.2 NAME							ľ
STREET ADDRESS			6.3 STREE1							
CITY-ST-ZIP	outile that the information appropried with this Cline	deed not a local	6.4 CHY-S		atadia C-	otion 110 07/	(2)(3) Florid-	Ctatutas 16	with the postility of the	the
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 any that I am an officer or director of the corporation or the receiver of trustee empowers in execute this profit as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachiment with an address										