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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000052502 (9)

RADIO VOX CORPORATION

Principal Place of Business								
300 NW 82 AVE								

Mailing Address

## FILED May 08 1997 8:00am Secretary of State



900 NW 82 AVE SUITE 506 PLANTATION FL 33324		300 NW 82 AVE SUITE 506 PLANTATION FL 33324-1883						
					3. Date Incorporated or Qualified 07/12/1994	3a. Date of Last I	Report	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	<del></del>	pplied For	
21	26				65-0513979	<del>- 1</del>	lot-Applicable	
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Dosfred	5. Certificate of Status Dosired See Required Fee Required		
City & State	0	City & State			Election Campaign Financing     Trust Fund Contribution		May Be to Fees	
Zip	Country	Zip	Count	У	8. This corporation has liability for	ation has liability for intangible tax under s. 199.032,		
24	25	29	30			Yes No		
	9, Name and Address of Curren	t Registered Agent		T	10. Name and Address of New Ro	gistered Agent		
	VENDEZ, GUSTAVO		81	Name				
300 NW 82 AVE SUITE 506 PLANTATION FL 33324			L	82 Street Address (P.O. Box Number is Not Acceptable)				
			83	<sup>\$</sup>				
			84	1 1		FL	Code	
11. Pursuant office or r agent. I a	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, F	utes, the abor authorized to lorida Stalute	ve-named by the corp as.	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing pt the appointment a	its registered s registered	
SIGNATURE	Signature, typed or printed name of registered ago		NE Registered A	gent signaturo	required when reinstating)	DATE		
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	PD	L_ DELET€	1.1 TITLE		V <b>⊉</b> D	Change	Addition	
NAME	MENENDEZ, GUSTAVO		1.2 NAME		CASTILLO, ROBOLFO.		•	
STREET ADDRESS	300 NW 82 AVE SUITE 506			1 ADDRESS	300 NM 85 NP YO 4800			
CITY-ST-ZIP	PLANTATION FL 33324	OF CT	1.4 C(1Y-	\$1 - 7(P	PLANTATION . FL.	11 AL.	1 4 4 2 5 -	
TITLE	STD	DELETE	2.1 7/11€			☐ Change	L_ Addition	
NAME	CASTILLO, BULEICA ALONSO 300 N W 82ND AVE #506		2.2 NAME					
STREET ADDRESS	PLANTATION FL			TADDRESS				
CITY-ST-ZIP TITLE	FEMILION FL	DELETE	2.4 CITY 3.1 THLE	- S1 - ZIP		Change	Addition	
		f™] Nffc+t				change	LT MODITION	
NAME STREET ADDRESS			3.2 NAME	I ADDRESS				
CITY-ST-ZIP TITLE		☐ DECETE	3.4. COY 4.1 TITLE	- 51 - ZIP		Change	Addition	
NAME			4.2 NAM	F	1	L_ Onlange	Band From Dil	
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP			4.4 DITY-					
TITLE		DELETE	5.1 TITLE	01-EII		Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS				T ADDRESS				
City-St-ZiP			5.4 D(TY-	-				
TITLE		DELETE	6.1 TITLE	<u> </u>		Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP			6.4 CITY					
14 Lela bara			0.4 (1117	31,511	I delegio Castino 110 07/2V/) Florido Castido	17 11 17 11		

4. I do hereby certify that the information supplied with this filling does not quality for the exemption slated 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 charteed, or or an exactment with an address.

CICMATURE.

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