

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

DOCUMENT # P94000062652 (0)

1. Corporation Name

CASHI OUTDOOR ADVERTISING, INCORPORATED

Principal Place of Business

1410 33RD STREET
ORLANDO FL 32839

Mailing Address

P.O. BOX 555847
ORLANDO FL 32855-5847



2. Principal Place of Business

21 CASHI Outdoor Adv. Inc.

Suite, Apt. #, etc.

22 2904 S. Westmoreland Dr

City & State

23 Orlando, Florida

Zip

24 32805

Country

25 U.S.

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27 SAME

City & State

28 SAME

Zip

29 SAME

Country

30 SAME

3. Date Incorporated or Qualified

08/22/1994

3a. Date of Last Report

02/01/1995

4. FEI Number

59-3275580

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

KASCHAI, R C
1410 33RD STREET
ORLANDO FL 32839

10. Name and Address of New Registered Agent

81 Name

Kaschai, R. Cash

82 Street Address (P.O. Box Number is Not Acceptable)

2904 South Westmoreland Drive

83 City

Orlando

84 State

FL

85 Zip Code

32805

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 607.0505, Florida Statutes.

SIGNATURE

R. Cash Kaschai

R. Cash Kaschai Pres.

5-29-96

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

(NOTE: Registered Agent Signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME KASCHAI, RALPH C
STREET ADDRESS 1120 BYERLY WAY
CITY-STATE-ZIP ORLANDO FL 32818

☐ DELETE

TITLE V
NAME KASTEN, USA K
STREET ADDRESS 8122 CITRUS HILL COURT
CITY-STATE-ZIP ORLANDO FL 32818

☐ DELETE

TITLE T
NAME KASCHAI, RALPH E
STREET ADDRESS 2385 FOREST CLUB DRIVE
CITY-STATE-ZIP ORLANDO FL 32804

☐ DELETE

TITLE S
NAME KASCHAI, FAY R
STREET ADDRESS 2385 FOREST CLUB DRIVE
CITY-STATE-ZIP ORLANDO FL 32804

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

☐ Change

☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

☐ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

☐ Change

☐ Addition

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:

R. Cash Kaschai Pres.

R. Cash Kaschai 5-29-96 407-422-8891

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Year/Phone #

CR2E034 (12/95)