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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400066221 (0)

## FILED Mar 19 1998 8:00am Secretary of State

SKYWAVE BROADCASTING CORPORATION Principal Place of Business Mailing Address 6400 S. W. 93RD AVENUE 6400 S. W. 93RD AVENUE MIAMI FL 33173 MIAMI FL 33173 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/06/1994 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 26 65-0524315 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Žip This corporation owes or has paid the current year Intangible Yes □ No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ONOZ. OSVALDO 6400 S. W. 93RD AVENUE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33173** 83 City Zip Code 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, Soction 607.0505, Florida Statutes. **SIGNATURE** Bignature, typed or printed name of registered agent and title it applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE ONOZ. OSVALDO JUAN NAME 1.2 NAME 6400 S. W. 93RD AVENUE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33173** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE Change NAME CEPERO, TEODOSIO 2.2 NAME STREET ADDRESS 6400 S. W. 93RD AVENUE 2.3 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33173** 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change NAME ONOZ. TERESITA 3.2 NAME 6400 S. W. 93RD AVENUE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33173 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME CEPERO, ANA MARIE 4.2 NAME 6400 S. W. 93RD AVENUE STREET ADDRESS 4.3 STREET ADDRESS **MIAMI FL 33173** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-\$1-ZIP Addition DELETE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby certify that the Information supplied with this filling 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 supplied that a port 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 of the rechiver or trustee empowered to execute bis report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or fin an attachment with an address.

wall

SIGNATURE:

3/12/58