PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000067837** 1. Corporation Name

TOROSIAN PUBLISHING INTERNATIONAL, INC.

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CAPE CORAL FL 33904 US 3. Date Incorporation of Crusilled 09/12/1994 2. Principal Place of Business 2. Amiling Address 2. Suito, Apt. F, etc. 2. Suito, Apt. F, etc. 3. Corribote of Status Desired 5. Corribote of Status Desired 6. Election Campaign Financing 7. Country 2. Dip Country 3. Suito 3. Name and Address or Current Registered Agent 7. Name and Address or Current Registered Agent 7. Dip Status Desired 7. Dip Status	Principal Place of Business Mailing Address								
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25 28 29 30 Personal Property Tax Yes No		Country		Cou	untry		8. This corporation owes the current year	Intangible	
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TOROSIAN, GEORGE JR. 5023 SKYLINE BLVD. CAPE CORAL FL 23994- 3 3 9 1 1		9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Registers	d Agent	
Size Address (P.O. Box Number is Not Acceptable)					81	Name			
SUZ3 SATURE BLVD. CAPE CORAL FL 33994— 3 3 9 / 14 83 84 City FL 85 Zip Code T1. 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 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, 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, 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, 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, or both in the State of Florida. Such change is registered agent of the purpose of changing its registered of the purpose of changing its registered agent of the purpose of changing its registered agent of the purpose of changing its registered of the purpose of change in the purpose of changing its registered agent of the purpose of changing its registered agent of the purpose of the purpose of changing its registered agent of the purpose		•			82	Street Add	ress (P.O. Box Number is Not Acceptable)		-
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 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, 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, 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 and time if applicable. (NOTE. Replaced Agent agent and time if applicable.) 12.			- /			Oli COL TINGE			
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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, 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, or both, in the State of Florida. Such change is presented agent and extra the obligations of, Section 607.0505. Florida Statutes. SIGNATURE					04	City	F		Code
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14. I 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 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, with all other like empowered.

SIGNATURE:

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90128 021 ***150.00