COR ANNU	PROFIT RPORATION JAL REPORT 1996		1	B Morthar ary of State	ń			
DOCUI 1. Corporation	MENT # P940	80000	5159 (9	))				
	r's News, Inc.							
Principal Place of Business Mailing Actoress								HANGO KINDA ONGON BANGO IDIN NOOL
7436 COLLINS AVE 7436 COLLINS AVE								
MIAMI BEAC	CH FL 33141	М	iami Beach FL 331	41				
						3. Date Incorporated or Qualified 11/22/1994		te of Last Report <b>05/01/1995</b>
2. Principal Pla	ace of Business	2a. N	Mailing Address			4. FEI Number	<u> </u>	Applied For
1	Commence of the contract of th	26				59-2715270	*************	Not Applicable
Suite, Apt. 1	#, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	<u></u>		City & State			6. Election Campaign Financing		\$5.00 May Be
3		28				Trust Fund Contribution		Added to Fees
Zip Gountry Zip 29			íφ	Country 30		8. This corporation has liability for intangible tax under s. 199.032, Filorida Statutes		
<u> </u>	9. Name and Address of Cu	4	red Agent			10. Name and Address of New F		Agent
					81 Name			
AMERIL					82 Street Add	ress (P.O. Box Number is Not Acceptab	ie)	
	MERIA AVE GABLES FL 33134			1	83			
					84 City	THE		85 Zip Code
11 Dura pat t	to the ere inlens of Postiana 6027	nena and ear	1500 Flast State			they are with this platement for the are	FI	_ 1 1
or register	red agent, or both, in the State of it fin and accept the obligations of it	agios and 607. Favida: Such c Secram 607.05	hange was authora Yah, Horida Statutes	es, the abor ed by the c	orporation's hoa	ration submits this statement for the pur nd of directors. Thereby accept the app	ointment a	is registered agent. I am
SIGNATURE								
12.	Structure specificación o registros  OFFICERS	AND DIRECT		13.	Ages tis graduor respons	ADDITIONS/CHANGES TO OFF	DATE	ID DIRECTORS IN 12
TIFLE	P		☐ DE. FTE	1 1 11	11.6	74.0.11010001740001001	100110711	Change Addition
NAME.	RODRIGUEZ, STEPHANIE	•		1.2 NA	ME			
STREET ADDRESS	7436 COLLINS AVE			. I	HEET AUDRESS			
CITY - ST - ZIP TITLE	MIAMI BEACH FL 33141		☐ DELETE	14 CF 2 1 TF	FY - S1 - ZIP			Change Addition
NAME				2 2 NA				
STREET ADDRESS				2351	REE! ACCRESS			
CITY-SI-ZIP				2 4 Ct	IV-SI-ZIP		·	
TITLE			DELETE	3 1 11				Change Addition
NAME				32 NA				
STREET ADDRESS CITY - ST - ZIP				- 1	INEET ADDRESS IY-ST-ZIP			
TITLE			☐ DELETE	4 1 11	****			☐ Change ☐ Addition
NAME				: 42 NA	ME.			
STREET ADDRESS	1				REFT ADDRESS			
CITY-ST-ZIP TITLE			☐ DELETE		1Y - S1 - 7IP			Change Cl Add too
	1		C Derest	5 1 TI 52 NA				Change Addition
NAME								
NAME STREET ADORESS				5 3 S!	REET ADORESS LY-S1-ZIF			
NAME STREET ADORESS CITY - ST - ZIP TITLE			DELETE	5 3 S!	REET ADDRESS IY-S1-ZIF	No. 100 (100 (100 (100 (100 (100 (100 (100	····	Change Addition

14. I do hereby certify that the information supplied with this filling 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 suppliernental 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 13 if changed, or on ay attachment with an address.

6.4 City SU-ZiP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CHY-ST-ZIF

ATURE AND TYPED OR PRINTED NAME OF LIGHNING OF LICEAGE DIRECTOR

Feb 3 1996 86524