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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P94000092632	(6)
1 Corporation Name		` '

AHTO	MACHINE	RADIO.	INC.
RUIV	MINUTURE	IIAUIU	IIIV.

7,5101	THE CHILD OF THE				
Principal Place of Business Mailing Address		4 10411001 119 10111 01831 00111 88161 8	/B419 BB19# 18418 13848 B1188 31118 1181 1881		
4430 WALLAC TAMPA FL 33		4430 WALLACE AVENU TAMPA FL 33611	JE		
				3. Date incorporated or Qualified 12/22/1994	3a. Date of Last Report 03/16/1995
— '	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Cuito Ant	# oto	26 Suite, Apt. #, etc.		59-3287338	Not Applicable S8.75 Additional
Suite, Apt.	#, \$ [\$.	27		5. Cortilicate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zp	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,	
24	25 9. Name and Address of Cur	rent Registered Agent	[30]	Florida Statutes X Yes No 10. Name and Address of New Registered Agent	
	5. Home and Padress of Car	Tonk (togisterou /igoni	81 Name		
KAHMI-I	DAVIDD DAYANIKO)AU.0	82 Street Add	ress (P.O. Box Number is Not Acceptat	n(o)
4430 WA	ALLACE AVENUE	,,,,,,	62 Street Mode	ress (F.O. Box Number is Not Acceptate	
TAMPA F			83		
(14/2-2-			84 City		85 Zip Code
WEST			1 1 1		FL T
11. Pursuante	to the provisions of Sections 607.05	502 and 607.1508, Florida Statu Iorida. Such change was authori	ites, the above named corpo- ized by the corporation's boa	ration submits this statement for the pul rd of directors. Thereby accept the app	pose of changing its registered office ointment as registered agent. I am
familiar w	ith, and accept the obligations of, S	ection 607.0505, Florida Statute	es.	, , , , , ,	•
SIGNATURE	Signature, typed or printed name of registered a	A A A A A A A A A A A A A A A A A A A	IOTE: Rug stered Agont signature regure		()A*-
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	n	PIDELETE	1 1 TITLE		Change Addition
NAME	HALIMI, DAVID D DAY	ANIKDAUIO	1.2 NAME		
STREET ADDRESS	4430 WALLACE AVENUE		1.3 STREET ADDRESS		
CITY - ST- ZIP	TAMPA FL		1.4 C/TY-ST-ZIP		
TITLE	ST	DELETE	2 1 स्वितः		Change T Addition
NAME	DAYANI, ROBIN		2 2 NAME	4000012	u, mrananzi
STREET ADDRESS	4813 TAWNERY AVE		2.3 STREET ADDRESS	4000017! -03/20/96011	018007
CITY - ST - ZIP	TAMPA FL 33624	[] DELFIE	24 CHY-SI-ZP 3 1 HILE	***200.00	Change Addition
TITLE NAME		occirc	3.2 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			3.4 CHY-ST-ZIP		
TITLE		DELETE	4 1 TITLE	0.1	Change Addition
NAMí			4.2 NAME	- 18-14	\mathbf{Q}
STREET ADDRESS			4.3 STREET ADDRESS	Cott (1)	•
CHY-ST-ZIP			4.4 CITY - ST - ZIP	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
TITLE		☐ DELETE	5 1 TITLE	.2	Change Maddition
NAME			5 2 NAME	V	
STREET ADDRESS			5 3 STREET ADORESS		
CITY-ST-ZIP		DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STHEET ADDRESS			6.3 STREET ADDRESS		
CITY - ST-ZIP			6.4 C(TY-ST-ZP		
14. I do here certify the	at the information indicated on taic s	annual report or supplemental an Mooration or the receiver or trust	mished and does not qualify mual report is true and accur- tee empowered to execute the	for the exemption stated in Section 119 ate and that my signature shali have the ais report as required by Chapter 607, F	> same legal ettect as it made unger

SIGNATURE:

DAYANI K 3, 13,96 (813)238-7878

CR2E034 (12/95)