FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9500002153 (1)

MEDIA DYNAMICS, INC.

FILED Apr 29 1997 8:00am Secretary of State



Principal Place of Business \$566 LINCOLN WAY HOLLYWOOD FL \$5026		3368 LINCOL	Mailing Address 3368 LINCOLN WAY HOLLYWOOD FL 33026-4856						
						3. Date Incorporated or Qualified 01/09/1995	3a. Date	e of Last 1/1996	Report
	Place of Business	2a. Mailing /	Address			4. FEI Number			Applied For
21		26				NOT APPLICABLE Not Applicable			
Suite, Apt	#, 8tC.	Suite, Ar	ot. #, etc.			5. Certificate of Status Desired			Additional
22 City & Stat	^	City & St	oto	•					Required
23 City & Siai		<u>├</u> ¬	ale			6. Election Campaign Financing			May Be
Zip	Country			Country		Trust Fund Contribution			to Fees
24	25	29	3(_ `	,	8. This corporation has liability for Florida Statutes	ntangible ta Yes 🔲		s. 199.032,
***	9, Name and Address of C			<u> </u>		10. Name and Address of New Re	· . —		
NEL	SON, WILLIAM L			81	Name	1	•		
	LINCOLN WAY								
	LYWOOD FL 33026			82	Street Ac	dress (P.O. Box Number is Not Acceptat	He)		
				83			· · · · · · · · · · · · · · · · · · ·		
								·····	
•				84	City		FL	65 Zip	Code
11. Pursuant office or ragent. La	to the provisions of Sections 607 registered agent, or both, in the lam familiar with, and accept the common sections.	7.0502 and 607.1508, F State of Florida Such c obligations of, Section i	lorida Statutes, change was aut 607.0505, Florid	, the abov horized b da Statute	e-named co y the corpor s	orporation submits this statement for the pration's board of directors. I hereby accept	uroose of o	hanging ritment a	its registered s registered
SIGNATURE									
10	Signature, typed or printed name of register		(NOTE F		ent signature rec	guired when reinstating)	DATE		
12.	OPTICERS	S AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFIC			
NAME	NELSON, WILLIAM L	L.	J OFFET	1.1 TITLE			L	Change	Addition
STREET ADDRESS	3368 LINCOLN WAY			1.2 NAME	1000000				
DITY-ST-ZIP	HOLLYWOOD FL 33026				ADDRESS				
TITLE	***************************************		DELETE	2.1 TITLE	SI-ZIP			Change	Addition
NAME		<u> </u>		2.2 NAME			L	Onange	
STREET ADDRESS				2.2 NAME 2.3 STREET	LADINDECC				
CITY-ST-ZIP	(•	2.4 CiTY-					
TITLE	- N	T	DELLLE	3.1 TITLE	31 · ZIF			Change	Addition
NAME		_		3.2 NAME			•	Ottaligo	
STREET ADDRESS				3.3 STREET	ADDRESS				
CITY-ST-ZIP				3.4 CITY-					
TITLE			DELETE	4.1 TITLE		18/11 - L. L. M. L		Change	Addition
NAME				4. 2 NAME				J -	
STREET ADDRESS				4.3 STREET	ADDRESS				į
CITY-ST-ZIP				4.4 CHY-S					
TITLE			DELETE	5.1 TITLE				Change	Addition
NAME				5.2 NAME				-	
STREET ADDRESS				5 3 STREET	ADDRESS				
CITY-ST-ZIP				5 4 CHY - S					
TITLE			DELFTE	61 TITLE				Change	Addition
NAME				6.2 NAME				="	
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY - S	IT - ZIP				

I do 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 trusted in powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address.