

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

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90082 029 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000018603

1. Corporation Name
MEDIA-INFO, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 3911 SW 47TH AVE STE 906 FT LAUDERDALE FL 33314-2818 US		Mailing Address 3911 S.W. 47TH AVE STE. 906 FT LAUDERDALE FL 33314-2818 US	
2. Principal Place of Business 21		2a. Mailing Address 26	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23 FORT LAUDERDALE, FL		City & State 28	
Zip 24		Country 29	
Country 25		Country 30	
3. Date Incorporated or Qualified 03/07/1995			
4. FEI Number 65-0576959			
Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No			

9. Name and Address of Current Registered Agent

**ORDON'O, PHIL
3911 SW 47TH AVENUE
SUITE 906
FT. LAUDERDALE FL 33314**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	STRIMBER, RICHARD D	1.2 NAME	
STREET ADDRESS	23470 FEATHER PALM COURT	1.3 STREET ADDRESS	3911 SW 47TH AVE, STE 906
CITY-ST-ZIP	BOCA RATON FL 33433	1.4 CITY-ST-ZIP	FORT LAUDERDALE, FL 33314-2818
TITLE	D ☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	STRIMBER, JACK M	2.2 NAME	
STREET ADDRESS	23470 FEATHER PALM COURT	2.3 STREET ADDRESS	3911 SW 47TH AVE, STE 906
CITY-ST-ZIP	BOCA RATON FL 33433	2.4 CITY-ST-ZIP	FORT LAUDERDALE, FL 33314-2818
TITLE	D ☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	ORDONO, PHILLIP	3.2 NAME	
STREET ADDRESS	3911 S.W. 47TH AVE, STE. 906	3.3 STREET ADDRESS	8130 CLEARY BLVD, APT 1301
CITY-ST-ZIP	FT LAUDERDALE FL 33314	3.4 CITY-ST-ZIP	PLANTATION, FL 33324-1373
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-26-99

(954) 583-7800

CR2E034 (11/98)