FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthans

Secretary of State
DIVISION OF CORPORATIONS

1996

REBSTOCK, JOHN

MIAMI FL 33144

1176 S.W. 67TH AVENUE

DOCUMENT # P95000020433 (5) --

MEDIA UNLIMITED, INC.

Principal Place of Business Maling Address 1176 S.W. 67TH AVENUE 1176 S.W. 67TH AVENUE MIAMI FL 33144 MIAMI FL 33144 3. Date Incorporated or Qualified 3a. Date of Last Report 03/14/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & Stalle 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s. 199.032 Country Ζφ 30 Florida Statutes Yes No 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name

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.

82

83

84 City

Street Address (P.O. Box Number is Not Acceptable)

SIGNATURE (NOTE: Registario) Agent signatura reci DA'E Signature, typed or protecting occupational agent wid the diapole also ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 DELETE Addition ☐ Change 1. 1 T.T.E TITLE REBSTOCK, JOHN 1.2 NAME NAME 1176 S.W. 67TH AVE. 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33144** 14017*-51-70 CITY - ST - ZIP Change ☐ Addition [] DELFIE 2.110.6 TILE 2.2 NAME NAME STREET ADDIRESS 2.3 STREET ADDRESS 2.4 City - St. ZiP CITY-ST-ZIP DELETE 3 1 [1], 8 Change Addition TITLE 3.2 NAMI NAME 3.3 STREET ADDRESS STREET ADDRESS CIEY \$1-712 3.4 CITY - ST - ZIF []] DELETE Change ☐ Add-tien 4. 1 T-TLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 10000173332 -03/05/96--01130--041 CITY - ST. ZIP 4.4 C-TY - ST - ZiP DELETE 5 11/16 THEE ***200.00 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City - ST, ZIP CITY-S1-216 Change ☐ Addit₁on DELETE 6.1 III. F TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CHY-ST-ZIP C:TY-ST-Z-P

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(it), 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 rusted 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 an antipalyment with an adaptment.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/96 305-267-6604 SG 3-5-96 CR2E034 (12/95)

Zip Code

85