## 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 # P95000031244 (3)

1ST IMPRESSION ADVERTISING, INC.

Principal Place of Business	Mailing Address
23261 NEW COACH WAY BOCA RATON FL	23261 NEW COACH WAY BOCA RATON FL 33433-6817

## FILED Apr 30 1997 8:00am Secretary of State



23261 NEW COACH WAY BOCA RATON FL		23261 NEW COACH WAY BOCA RATON FL 33433-6817							
						3. Date Incorporated or Qualified 04/17/1995	3a. Date o		eport
	Place of Business	<del> </del>	2a. Mailing Address			4. FEI Number			oplied For
21	1 4 ala	26	S 4 .4			65-0583957			ot Applicable
Sulte, Apt. #, etc.		27				<b>5.</b> Certificate of Status Desired See Required Fee Required			
City & Sta		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Zip Country 29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes			
	g, Name and Address of Cur	rent Registered A	gent		T 41	10. Name and Address of New Rep	gistered Age	nt	
	NNA, EDWARD T			81	Name				
719 INTRACOASTAL DR FT LAUDERDALE FL				82		Address (P.O. Box Number is Not Acceptable)			
				83	1	•			
				84	City		FL	5 Zip	Code
11. Pursuan office or agent. I	t to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the ob-	0502 and 607.1508 ate of Florida. Such digations of, Sectio	i, Florida Statu n change was in 607.0505, F	utes, the above authorized b Florida Statute	re-named co y the corpor s	orporation submits this statement for the pration's board of directors. I hereby accep	urpose of ch t the appoint	anging it mont as	s registered registered
SIGNATURE									
40	Signature, typed or printed name of registered		io. (NC		ent signature rec	quired when reinstating)	DATE		
<b>12.</b> TITLE	DP OFFICERS	AND DIRECTORS	DELETE	<b>13.</b> 1.1 Title		ADDITIONS/CHANGES TO OFFIC		PECTOR Change	RS IN 12 Addition
NAME	BURKE, DONALD J JR		_ occere	1.2 NAME				Change	L. Addition
STREET ADDRESS	Assertiment Assertant				T ADDRESS				
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-	ļ				
TITLE			DELETE	2.1 TILLE	31-211			Change	Addition
NAME				2.2 NAMÉ			_	•	
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP				2. 4 CITY-	- 1	•			
TITLE			DELETE	3.1 TITLE				Change	Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREE	1 ADDRESS	•			
CITY-ST-ZIP				3.4 CITY-	S1-ZIP				
TITLE			☐ DELETE.	4.1 TITLE		1		Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREE	T ADDRESS				
CITY-ST-ZIP			T ALLEYS	4.4 CITY-	ST-ZIP				
TITLE			DELETE	5.1 TITLE			LJ	Change	Addition
NAME				5.2 NAME					
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP			Delete	5.4 City	ST-ZIP			A+	
TITLE			DELETE	6.1 TITLE			لـا	Change	Addition
NAME				6.2 NAME					
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP	t			6.4 CHY-	ST-ZIP				

14. 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 exemption or the received or trusted appears in Block 12 or Block 13 if changed or crystal spacetiment within address.

WONATURE TO WORK TO 16/

1/1/01

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