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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000035446 (0)
1. Corporation Name

ROSSHHEDGLON ADVERTISING INC.

APPROVEL AND FILED

96 MAY -1 PM 12: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Dringgood Dings	of Business	Mahini Andross			
Principal Place of Business Maing Andress  #818 FAST SAMPLE ROAD  1313 FAST SAMPLE ROAD			1811		
POMPANO BEACH FL 2004 POMPANO BEACH FL 2004					
				3. Date Incorporated or Qualified 05/01/1995	3a. Date of Last Report
2. Principal Pla	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-0501773	Not Applicable
Suite, Apt. #	PONE 8th Court	27 2348 NE	8th Court	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State  Pom O ANO	Beach	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zp 2 2/	OCOUNTY / I CA	2m22010	Country USA	8. This corporation has liability for in	
	25 434		30 4314	Florida Statutes Yes  10. Name and Address of New R	
	g. Name and Address of Current	negistered Agent	81 Name	10, Name and Address of New A	egistered Agent
HEDOL	LON MICHAEL I				
	LON, MICHAEL J EAST SAMPLE ROAD		82 Street Add	ress (P.O.B. Aveniber in Standarden in	ount
	ANO BEACH FL 33004		83	10 11= 0 -	
· I OMI /	ANO DESCRIPTE 00007				las Zo Codo
			84 Oity <b>Q</b>	mous Beach	FL 85 Zip Code 330 62
or registers	to the provisions of Sections 607,0502 and agent, or both, in the State of Flonds th, and accept the obligations of, Section	<ol> <li>Such change was authorized.</li> </ol>	the above named corpo by the corporation's boa	ration submits this statement for the pur and of directors. Thereby accept the appe	pose of changing its registered office pintment as registered agent. Lanu
SIGNATURE _		7.77.40			DATE
12.	Signature, typed or printed name of register clayer to OFFICERS AND		Exp. tered Agent signature to pin.  13.	ADDITIONS/CHANGES TO OFF	
THILF	5,110,10,741	DELETE	1 1 TiTut	1P/T/6	Change Addition
NAME		_	12 NAME	chad T Hedalon	
STREET ADDRESS			1.3 \$1REET ADDRESS 2.1	48 NE PA COURT	
CITY - ST - ZIP			14 CITY ST-ZIP	MPANO Beach FL	33062
TITLE		☐ DELETE	2 1 TICLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
C-TY-ST-ZIP			24 CITY ST ZIP		
THILE		☐ DEFEIE	3 1 liTLE		Change Addition
NAME			3.2 NAME	500	001826855
STREET ADDRESS			3.3 STREET ADDRESS		79601058010
CITY - ST - ZIP		FT OF FTG	3.4 C(T) - S1 - Z(P)	****	nn_00 ****200.00
TITLE		☐ DELETE	4 1 TITLE		Change . Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-ST-ZIP		☐ DELFTE	4.4 CiTY - ST - ZiP		Change Addition
TITLE		☐ berrie	5 1 111(F : 52 NAME	<b>\</b> (\(\hat{h}\)\)	C comage C Mad data
NAME OTOGET ADDRESS			5.3 STREET ADDRESS	1/2/15/10	
STREET ADDRESS				Ψ,	
CITY - ST - ZIP TITLE		☐ DELETE	5.4 C(1Y+S1-2)P 6.1 T(1)E		Change Addition
			6 2 NAME		
NAME STREET ADDRESS			63 STREET ADDRESS		
			0 0 0 1 IL C PARATICIO		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

4. I do hereby certify that the information supplied with this hing is voluntarily furnished and does not quarry for the exemption stated in stated in 1450 (s)(k), i folial distincts. Industrial that the information indicated on this annual report or supplemental annual report is frue 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 enjowered 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 altrady point with an articless.

SIGNATURE: Mice

SIGNATURE AND TYPED OF PRINTED NAME OF JIONING OFFICER OR DIRECTOR

THOUGHTON

Tresiden

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4/26/96 154-943-5626