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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000039144 (7)

ISRAEL INTERNATIONAL TELEVISION CORPORATION Principal Place of Business Mailing Address 2601 SOUTH BAYSHORE DRIVE 2601 SOUTH BAYSHORE DRIVE 19TH FLOOR 19TH FLOOR MIAMI FL 33133 **MIAMI FL 33133** 3. Date Incorporated or Qualified 05/17/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0598120 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22

## FILED Feb 09 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

Not Applicable

City & Sta	te	City & State				6. Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	c	ountry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. XX Yes No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent
COBER CORPORATE AGENTS, INC.				81	Name	;
2601 SOUTH BAYSHORE DRIVE			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
19TH FLOOR						
MIAMI FL 33133				83		
				84	City	85 Zip Code
				ot		FL   63   219 COURT
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 PSTD DELETE			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE			TITLE	- [	L. Grange L. Acumon	
NAME				NAME		
STREET ADDRESS	3414341 57			STREET	ADDRESS	
CITY - \$T - ZIP	MIAMI FL			CITY-ST	r- ZIP	
TITLE	1	□ υ		TITLE		Change Addition
NAME	}		2.2	NAME		
STREET ADDRESS			2.3	STREET.	ADDRESS	
CITY - ST - ZIP				CITY-S	T-ZIP	
TITLE		□□□	ELETE 3.1	ULFE		☐ Change ☐ Addition
NAME	}		3.2	MAME	-	
STREET ADDRESS			3.3	STREET .	ADDRESS	
CITY-ST-ZIP	<u> </u>			CITY-S	T-ZIP	
TITLE		∐ D	ELETE 4.1	TITLE		☐ Change ☐ Addition
NAME	,		4. 2	NAME	1	
STREET ADDRESS			4.3	STACET	ADDRESS	
CITY-ST-ZIP				CITY-ST	- ZIP	
TITLE		∐ 0	ELETE 5.1	TITLE		☐ Change ☐ Addition
NAME			5.2	NAME		
STREET ADDRESS			5.3	STREET	ADDRESS	
CITY - ST - ZIP	<u> </u>		5.4	CITY-ST	- ZIP	
TITLE			ELETE 6.1	TITLE		☐ Change ☐ Addition
NAME	J		6.2	NAME		
STREET ADDRESS			6.3	STREET A	ADDRESS	
CITY - ST- ZIP			6.4	CITY-ST	-ZIP	
14 barabu	and to the the interpreties of section	with this filles does not	quality for the o	(amont	ion stated	in Section 119.07(3Vi) Florida Statutes I further certify that the information

14. I hereby certify that the information supplied with this filling 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 or arrangement with an address.

SIGNATURE:

Michael Brind COUIRED

2/2/98

(305) 854-5900