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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000040025

MEGABYTE PUBLISHING, INC.

Principal Place of Business	Mailing Address
4701 SW 45TH ST. BLDG. 15. #37 FORT LAUDERDALE FL 33314	P.O. BOX 15937 PLANTATION FL 33318 US
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FILED Apr 15, 1999 8:00 am Secretary of State 04-15-1999 90031 032 ***150.00



Principal Place	e of Business	Mailing Address		·		21)1 919 11 23111 34114 1	11891 81+1 (881
4701 SW 45TH ST. P.O. BOX 15937					i		
BLDG. 15. #37 PLANTATION FL 33318					DO NOT WRITE IN THIS SPACE		
FORT LAUDERDALE FL 33314 US					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					05/18/1995	I lan	oliod For
2. Principal Place of Business 2a. Mailing Address 25 PO Box 159					4, FEI Number	 	plied For t Applicable
1003 000 0				_/	65-0586956	- 	
Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A Fee Re	l I
22		27 37 State					·
City & Stat	61-12-51	City & State	$0 \sim 1$	7_	6. Election Campaign Financing	\$5.00 Added to	- 1
23 Pla	wearton, 12	28 Partation	Count		Trust Fund Contribution		0 1 663
一 Zip ユスプ	つ Country	Zip 222/9 [¬ ' ' ' '	"i SA	8. This corporation owes the current year	r intangible ☐ Yes	₩o
24 50	0(7 25 USH	29 3500 3	<u> </u>	LOVI_	Personal Property Tax. 10. Name and Address of New Registe		9810
	9. Name and Address of Currer	it Registered Agent	5	31 Name	To, Name and Address of New Registo	ou rigent	
RALI	r, theresa d			, INGING			
	S SW 2ND ST.		8	Street A	ddress (P.O. Box Number is Not Acceptable)		
	NTATION FL 33317			33			
"	MIAHON I E 33317		\ \	53			Ì
}	•		ε	34 City		85 Zip C	Code
					-		
11. Pursuant	to the provisions of Sections 607.050)2 and 607.1508, Florida Statutes	, the abo	ove-named c	orporation submits this statement for the purpos ation's board of directors. I hereby accept the a	e of changing its oppintment as rec	registered distered
agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	ations of, Section 607.0505, Florid	la Statut	es.		1 1-	_
SIGNATURE	1. 0. 0. 1	B. Theres	sa E). Bar	a hesident 4	12/99_	
SIGNATORE	Signature, typed or printed name of registered age	int and title if applicable. (NOTE: R	-	gent signature rec			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		Addition
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NAME	BAUR, THERESA D		1.2 NAM	E			- 1
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CITY-ST-ZIP	PLANTATION FL 33317						
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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.

6.4 CITY-ST-ZIP