

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # Launch Media, Inc. 1. Corporation Name P45000048991			
Principal Place of Business Launch Media, Inc.		Mailing Address 3410 Galt Ocean Dr. 1607N Fort Lauderdale, Florida 33308	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 6/19/95	3a. Date of Last Report 05/01/96
21. State, Apt. #, etc.	26. State, Apt. #, etc.	4. FEI Number 59-3358195	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Title: CEO NAME: Kathleen F. Lyman 3410 Galt Ocean Drive 1607N Fort Lauderdale Florida 33308		81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City FL 85. Zip Code	
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: Kathleen F. Lyman CEO (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	☐ DELETE	11. TITLE Kathleen F. Lyman CEO	☐ Change ☐ Addition
2. STREET ADDRESS		12. NAME	
3. CITY - ST - ZIP		13. STREET ADDRESS 3410 Galt Ocean Dr. 1607N Fort Lauderdale FL 33308	☐ Change ☐ Addition
4. TITLE	☐ DELETE	21. TITLE	
5. NAME		22. NAME	
6. STREET ADDRESS		23. STREET ADDRESS	
7. CITY - ST - ZIP	☐ DELETE	24. CITY - ST - ZIP	☐ Change ☐ Addition
8. NAME		31. TITLE	
9. STREET ADDRESS		32. NAME	
10. CITY - ST - ZIP	☐ DELETE	33. STREET ADDRESS	
11. NAME		34. CITY - ST - ZIP	☐ Change ☐ Addition
12. STREET ADDRESS		41. TITLE	
13. CITY - ST - ZIP	☐ DELETE	42. NAME	
14. NAME		43. STREET ADDRESS	
15. STREET ADDRESS		44. CITY - ST - ZIP	☐ Change ☐ Addition
16. CITY - ST - ZIP	☐ DELETE	51. TITLE	
17. NAME		52. NAME	
18. STREET ADDRESS		53. STREET ADDRESS	
19. CITY - ST - ZIP	☐ DELETE	54. CITY - ST - ZIP	☐ Change ☐ Addition
20. NAME		61. TITLE	
21. STREET ADDRESS		62. NAME	
22. CITY - ST - ZIP	☐ DELETE	63. STREET ADDRESS	
23. NAME		64. CITY - ST - ZIP	
14. I declare under penalty 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 included on the 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.			
SIGNATURE: Kathleen F. Lyman CEO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Kathleen F. Lyman CEO		April 21, 1997 954-565.6210 Date Daytime Phone	

CP-E034 (9/96)