

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 23 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000055097 (6)  
1. Corporation Name

AMPLIMIDIA CORPORATION

Principal Place of Business  
5850 LAKEHURST DRIVE  
SUITE 205  
ORLANDO FL 32819

Mailing Address  
5850 LAKEHURST DRIVE  
SUITE 205  
ORLANDO FL 32819



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/14/1995

4. FEI Number

59-3251124

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 7345 SAND LAKE RD

Suite, Apt. #, etc.

22 301

City & State

23 ORLANDO - FL

Zip

24 32819

Country

25 USA

2a. Mailing Address

26 7345 SAND LAKE RD

Suite, Apt. #, etc.

27 301

City & State

28 ORLANDO - FL

Zip

29 32819

Country

30 USA

9. Name and Address of Current Registered Agent

RODRIGUES, CARLOS A.C.  
1315 BRADWELL DRIVE  
ORLANDO FL 32837

10. Name and Address of New Registered Agent

81 Name CARLOS A.C. RODRIGUES

82 Street Address (P.O. Box Number is Not Acceptable)  
2637 SHINOAK DRIVE

83

84 City ORLANDO

FL

85 Zip Code 32837

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

07/20/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD RODRIGUES, JOSE CARLOS

STREET ADDRESS 1315 BRADWELL DRIVE

CITY-ST-ZIP ORLANDO FL 32837

TITLE ☐ DELETE

NAME VPD DE CASTRO RODRIGUES, MARIA ELOA

STREET ADDRESS 1315 BRADWELL DRIVE

CITY-ST-ZIP ORLANDO FL 32837

TITLE ☐ DELETE

NAME STD RODRIGUES, CARLOS A.C.

STREET ADDRESS 1315 BRADWELL DRIVE

CITY-ST-ZIP ORLANDO FL 32837

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

12 NAME PD RODRIGUES, JOSE CARLOS

13 STREET ADDRESS 2631 SHINOAK DRIVE

14 CITY-ST-ZIP ORLANDO - FL 32837

2.1 TITLE ☒ Change ☐ Addition

22 NAME VPD DE CASTRO RODRIGUES, MARIA ELOA

23 STREET ADDRESS 2631 SHINOAK DRIVE

24 CITY-ST-ZIP ORLANDO - FL 32837

3.1 TITLE ☒ Change ☐ Addition

32 NAME STD RODRIGUES, CARLOS A.C.

33 STREET ADDRESS 2637 SHINOAK DRIVE

34 CITY-ST-ZIP ORLANDO - FL 32837

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

500002598205

-07/24/98--01087--018

\*\*\*150.00

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.

SIGNATURE:

07/20/98 (407) 248-0171

CR2E034 (5/98)



**AMPLIMIDIA CO.**  
NEWSPAPER SALES & MEDIA REPRESENTATIVES

*pg 2*

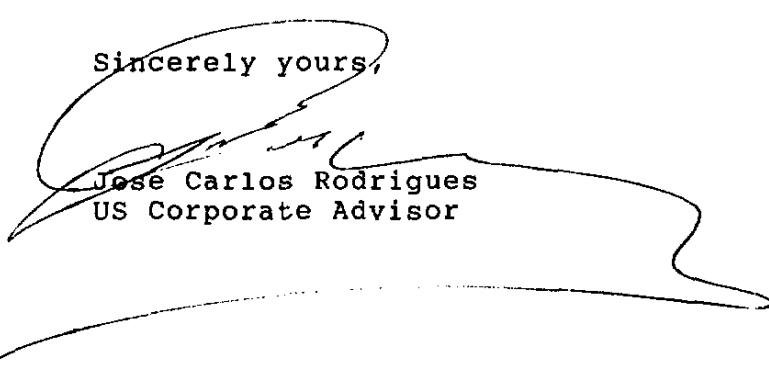
Orlando July/20/98

Florida Department of State  
Division of Corporations  
PO BOX 6327  
Tallahassee, Florida 32314

Gentleman:

Please accept my payment of \$ 150.00 instead \$ 550.00 due to the fact that we never received the first notice of the 1998 Profit Corporation Annual report.  
We recently moved our office to the new location described in block 2 of the report.  
If you have any questions please call me at the telephone (407)248-0171.  
Thank You Very Much!

Sincerely yours,

  
Jose Carlos Rodrigues  
US Corporate Advisor