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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

STREET ADDRESS

SIGNATURE:

Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP

3630 BOUGAINVILLEA ROAD

COCONUT GROVE FL 33133



FLORIDA DEPARTMENT OF STATE

FILED

Mar 26 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

## Sandra B. Mortham

C/O ACCOUNTING & BUSINESS CONSULTANTS

790 E. BROWARD BLVD., #302 FT. LAUDERDALE FL 33301

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000070881 (4)

MIAMI EDITORIAL PRODUCTIONS, INC.

3. Date Incorporated or Qualified 09/13/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0611671 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Ζıp Country 8. This corporation owes or has paid the current year Intangible X Yes 24 25 29 30 Personal Property Tax due June 30. D No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KARTEN, WENDY LEIGH 3630 BOUGAINVILLEA ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **COCONUT GROVE FL 33133** 83 84 65 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 Signature, typed or ponted name of registered agent and life if applicable (NO11: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE KARTEN, WENDY L NAME 1.2 NAME 3630 BOUGAINVILLEA ROAD STREET ADDRESS 1.3 STREET ADDRESS COCONUT GROVE FL 33133 CITY-ST-78 1.4 CITY-ST-ZIP -ТР DELETE Change A Addition TITLE 2.1 TITLE KARTEN, WENDY L NAME 2.2 NAME 3630 BOUGAINVILLEA ROAD STREET ADDRESS 2.3 STREET ADDRESS COCONUT GROVE FL 33133 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition Change 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY+ST-ZIP DELETE Change Addition 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP THILE DELETE 6 1 TITLE ☐ Change Addition NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby 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 arm 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