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

Mailing Address

1652 EASTLAKE WAY

FORT LAUDERDALE FL 33326-2735

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

FORT LAUDERDALE FL 33326

1652 EASTLAKE WAY

City-St-ZiP

SIGNATURE:

I am an officer or director of the cor appears in Block 12 or Block 1



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000075956 (9)

AD-SQUAD ADVERTISING AND MARKETING, INC.

3. Date Incorporated or Qualified 3a. Date of Last Report 09/29/1995 05/01/1996 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0621639 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation has liability for intangible tax under s. 199 032, Yes Florida Statutes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name RICKETTS, CARL A 1652 EASTLAKE WAY 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33326 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TITUE RICKETTS, CARL A 1.2 NAME NAME 1652 EASTLAKE WAY 1.3 STREET ADDRESS STREET ADURESS FORT LAUDERDALE FL 33326 1.4 CITY - ST - ZIP CITY - ST- ZIP Change Addition DELETE 2.1 TITLE TITLE MUHSIN, ABDUL H 2.2 NAME NALLE 17645 N.W. 18TH AVENUE 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33054 2 4 City-St-ZiP COY-SI-ZIE DELETE Change ☐ Addition ST 31 TITLE THEF LUNN, LESUE M 3.2 NAME NAME 1209 MANOR DRIVE SOUTH STREET ADDRESS 3.3 STREET ADDRESS FORT LAUDERDALE FL 33326 3.4. CITY-ST-ZIP CHTY-ST-7IF Change Addition DELETE 4.1 TITLE HILE 4. 2 NAME NAME 4.3 STREET ADDRESS STHEET ADDRESS CI39 - ST - 215 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE THEF 5.2 NAME NAMI **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CHY+ST 70° DELETE Change Addition 6.1 TITLE TILLE 6.2 NAME NAM[©] 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

ort is true and accurate and that my signature shall have the same legal effect as if made under oath; that empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

14. I do 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 supplies ontal angular great is true and accurate and that my signature shall have the same legal effect as if made under

FILED May 15 1997 8:00am Secretary of State

