

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

FILED
Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000088102 (5)

1. Corporation Name
JASON WILDER ADVERTISING, INC.

Principal Place of Business
717 JEFFERSON AVE SUITE 2
MIAMI BEACH FL 33139


Mailing Address
717 JEFFERSON AVE SUITE 2
MIAMI BEACH FL 33139-9528



2. Principal Place of Business 21 1630 SOUTH TREASURE DR Suite, Apt. #, etc. 22 17 City & State 23 NORTH BAY VILLAGE Zip 24 33141		2a. Mailing Address 26 SAME Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 US		3. Date Incorporated or Qualified 11/15/1995	3a. Date of Last Report 04/16/1996
				4. FEI Number 65-0623726	Applied For Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent WILDER, JASON 730 10TH ST APT 201 33139 BCH FL 33139		10. Name and Address of New Registered Agent 81 Name WILDER, JASON 82 Street Address (P.O. Box Number is Not Acceptable) 1630 S. TREASURE DR #17 83 84 City NORTH BAY VILLAGE FL 85 Zip Code 33141	
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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  DATE 4/15/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P
NAME	WILDER, JAMES	1.2 NAME	WILDER, JASON
STREET ADDRESS	730 10TH ST APT 201	1.3 STREET ADDRESS	1630 S. TREASURE DR. #17
CITY-ST-ZIP	MIAMI BCH FL	1.4 CITY-ST-ZIP	NORTH BAY VILLAGE FL 33141
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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 or on an attachment with an address.

SIGNATURE  DATE 4/15/97

CR2E034 (9/96)