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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🎝

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600000762 (0)

ENTERTAINMENT NEWS NETWORK, INC.

FILED Jun 10 1997 8:00am Secretary of State



Principal Place of Business	Maning Adoress			
1825 N.E. 149 Plagler Street, Suite 101 Miami Fl 33181	1825 N.E. 149 Flagler- St Miami fl 33181	REET, SUITE 101		
			3. Date Incorporated or Qualified 01/04/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address	WA CH I	4. FEI Number	Applied For
11825 NE 149 STREET	26 X25NC	149 Street	65-0724691	Not Applicable
Suite, Apı. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for if	ntangible tax under s. 199.032,
25		30	Florida Statutes	Yes 💹 No
9. Name and Address of Curren	Registered Agent		10. Name and Address of New Reg	gistered Agent
DWYER, PHYLLIS A		81 Name		
275 N.W. 181 STREET		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
MIAMIFL 33169			· · · · · · · · · · · · · · · · · · ·	<u> </u>
J.		B3		
∮ ∟		84 City		85 Zip Code
		7 1		FL
 Pursuant to the provisions of Sections 0170502 office or registered agent, of both, in/lin/state agent. I am familiar with, and accept yey obligate 	2 and 907.1508, Florida Sta lute	sthe above-named corp	poration submits this statement for the pi	urpose of changing its registered
agent. I am familiar with, and accept the obliga-	lions of Section 607.0506, Flor	ida Statutos.	worrs board of birectors, i hereby accept	1 1
SIGNATURE YVXXXX	$\mathcal{N} \cdot \mathcal{M} / \mathcal{M}$	MYLL		41119-6
	and title if applicable NOTE	Registere (Agent signature require		DAT
2. ØFFICERS AND		1/1/ ₁	ADDITIONS/CHANGES TO OFFIC	
THE PHYLLIS A.D	w yex -		AMEING DIREC	70K LI Criange La Adention
1000 AMA/ 181	STREGT	1.2 NAME	,	
STREET ADDRESS	23169	1.3 STREET ADDRESS	•	
HTY-ST-ZIP W A A A A A A A A A A A A A A A A A A	DELETE	1.4 CITY+ST+ZIP 2.1 TiTLE		Change Addition
AME	- breeze	1		Change C Addition
j		2.2 NAME		
TREET ADDRESS		2.3 STREET ADDRESS		
ITY-ST-ZIP	DELETE	2 4 CHY+ST+7/P 3 1 THLE		Change Addition
NAME	_	32 NAME		
STREET ADDRESS		3 3 STHEET ADDRESS		
CITY-ST-ZIP		3.4. C(1)Y - S1 - Z(P		
ITLE	DELETE	4.1 Title		Change Addition
IAME		4. 2 NAMÉ		-
TREET ADDRESS		4.3 STREET ADDRESS		
SITY-ST-ZIP		4.4 CITY - ST - ZIP		
ITLE	DELETE	51 TITLE		Change Addition
IAME /		5.2 NAME		
TREET ADDRESS		5.3 STREET ADDRESS		
NTY-ST-ZIP		5.4 CITY-ST-ZIP		
TLE	☐ DELETE	6.1 TITLE		Change Addition
AME		6.2 NAME		
TREET ADDRESS		6.3 STREET ADDRESS		
HTY-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	d in Section 119.07(3)(i), Florida Statutes	I further certify that the
14. I do hereby certify that the information supplied information indicated on this annual Jeport or su I am an officer or director of the christation or appears in Block 12 or Block 13 if changed, or	ippicylegigii annual report is tru the McGlyor or trustee epipowo	re and accurate and that ired to exercite this repor	this signature snail have the same legal of as required by Chapter 607/ Florida St	enect as it made under bath; tha atutes; and that my name
			1157.0/	17
RIGHATURE VINNE	MUUS ELM	JH31 D/	WIU 01 9/1	19+