FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90031 022 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000018631

1. Corporation Name

STREET ADDRESS

POLICE	TODAY PUBLISHING GROU	P, INC								
Principal Place	e of Business	Mailing	Address	_				- 1 19812881 (18 18118 6115) 98111 88111 98111	#1 11 00 1 (0 11 0 0 11)	00 (114) 11 0 1 (00)
2787 E. OAKLAND PARK BLVD. 2787 E. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33306					D.			DO NOT WRITE IN TH	IS SPACE	
								3. Date Incorporated or Qualifed	O OI AOL	
								02/27/1996		ļ
2 Principal P	lace of Business	2a. Maili	ing Address	_				4. FEI Number	Α	Applied For
21	ago o, Basilloso	26						65-0727296	<u> </u>	lot Applicable
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				3.7	5. Certificate of Status Desired		Additional . Required
City & State	 e		City & State					6. Election Campaign Financing	\$5.00	May Be
23	<u>.</u>	<u>├</u>	28					Trust Fund Contribution		i to Fees
Zip	Country 25	Zip 29		Cou	ntry			This corporation owes the current year I Personal Property Tax.	Intangible Yes	□No
•••	9. Name and Address of Curren		l Agent	11	Ι			10. Name and Address of New Registere	d Agent	
	<u> </u>				81	Name				
FESSLER, KLAUS CLAUS 2787 E. OAKLAND PARK BLVD.					82	Street	Address (P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33306				83					i	
,									11-5	
					84	City		F	L 85 Zip	Code
office or n	egistered agent, or both, in the State or m familiar with, and accept the obligat	of Florida, Su tions of, Secti	ich change was a lion 607.0505, Flo	rida Stati	i by utes.	tne corp	oration	ration submits this statement for the purpose n's board of directors. I hereby accept the app	of changing it ointment as r	ts registered registered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registr 12 OFFICERS AND DIRECTORS						t signature i	rednilea ,	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
12.	D OPPICERS AN	D DIRECTO	DELETE	13.	n F		Γ	ADDITIONS/CHANGES TO OFFICERS	Change	
NAME	FESSLER, KLAUS CLAVS			1.2 N						}
STREET ADDRESS	2787 E. OAKLAND PARK BLVD.				1.3 STREET ADDRESS					
	FT. LAUDERDALE FL 33306	•			1.4 CITY-ST-ZIP			•]
CITY-ST-ZIP TITLE	11. EAGDERDALE TE GOOD		☐ DELETE	2.1 TI	_	1-231	1		☐ Change	☐ Addition
NAME				2.2 N	WE					
STREET ADDRESS	·					ADDRESS	1	-		
CITY-ST-ZIP	· -		-	2.4 C			٠٠.	· ·		
TITLE			☐ DELETE	3.1 TI	_				☐ Change	Addition
NAME				3.2 NA	ME					
STREET ADDRESS				3.3 \$1	REET	TADDRESS	Ì			
CITY-ST-ZIP				3.4. C	ITY-S	T-ZIP				
TITLE			☐ DELETE	4.1 TF	ΠE				☐ Change	e 🗀 Addition
NAME				4. 2 N	AME					
STREET ADDRESS				4.3 ST	REET	TADORESS	ļ			
CITY-ST-ZIP				4.4 CI	TY-S	T-ZIP	<u> </u>			
TITLE			☐ DELETE	5.1 TI			Ì		☐ Change	e 🗌 Addition
NAME				5.2 N/						
STREET ADDRESS						F ADDRESS	.			
CITY-ST-ZIP				5.4 CI		T-ZIP	<u> </u>			
TITLE			☐ DELETE	6.1 Tr					Change	e Addition
NAME	SOUTH FRANKE			6.2 N/						
STREET ADDRESS				6.3 S	REET	TADDRESS	1			ì

CITY-ST-ZIP 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: 1