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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P96000033522 (9)

4-PAGE MEDIA INC.

Principal Place of Business

Mailing Address

## **FILED** May 11 1998 8:00am Secretary of State



**B145 WINNOPESAUK WAY** 8145 WINNIOPESAUK WAY LAKE WORTH FL 33467-5510 LAKE WORTH FL 33467-5510 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/16/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 65-0661318 26 Suite, Apt. #, etc Suite, Apl. #, 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 Added to Fees Trust Fund Contribution 23 28 Zip Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 30 24 29 25 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent **B1** CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BLVD. Street Address (P.O. Box Number is Not Acceptable) SUITE 211 83 PALM BEACH GARDENS FL 33418 Zip Code **B4** City 85 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 printed name of registered agent and title diapplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change TITLE 1.1 TITLE CLONTZ, DEREK 1.2 NAME NAME STREET ADORESS % 8145 WINNIPESAUK WAY 1.3 STREET ADDRESS LAKE WORTH FL 33467-5510 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE CLONTZ. SUSAN 2.2 NAME NAME % 8145 WINNIPESAUK WAY 2.3 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33467-5510 2.4 CITY - ST- ZIP CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change ■ Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE THILE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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 supplieriental 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 ampowered 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 attactment with an address

SIGNATURE: