


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

FILED
Mar 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000035181 (2) 1. Corporation Name IMPACT MEDIA GROUP, INC.			
Principal Place of Business 411 S.E. 4TH ST. POMPANO BEACH FL 33060		Mailing Address 411 S.E. 4TH ST. POMPANO BEACH FL 33060	
2. Principal Place of Business 21 6210 N. Andrews Ave Suite, Apt. #, etc. 22		2a. Mailing Address 26 SAME Suite, Apt. #, etc. 27	
City & State 23 Ft. Lauderdale FL Zip 24 33309 Country 25 USA		City & State 28 Zip 29 Country 30	
9. Name and Address of Current Registered Agent HALPIN, GARY A 411 S.E. 4TH ST. POMPANO BEACH FL 33060		10. Name and Address of New Registered Agent 81 Name 82 Street Address (R.O. Box Number is Not Acceptable) 6210 N. Andrews Ave 83 84 City Ft. Lauderdale 85 FL 86 Zip Code 33309	
11. Pursuant to the provisions of Sections 607.0507 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS			
TITLE	D	<input type="checkbox"/> DELETE	
NAME	HALPIN, GARY A		
STREET ADDRESS	411 S.E. 4TH ST.		
CITY - ST - ZIP	POMPANO BEACH FL 33060		
TITLE	D	<input type="checkbox"/> DELETE	
NAME	MADLE, DONALD J		
STREET ADDRESS	411 S.E. 4TH ST.		
CITY - ST - ZIP	POMPANO BEACH FL 33060		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME			
1.3 STREET ADDRESS	6210 N. Andrews Ave		
1.4 CITY - ST - ZIP	Ft. Lauderdale FL 33309		
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME			
2.3 STREET ADDRESS	6210 N. Andrews Ave		
2.4 CITY - ST - ZIP	Ft. Lauderdale FL 33309		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/19/1996	
4. FEI Number 65-0677968	Applied For <input type="checkbox"/> 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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.

SIGNATURE _____ DATE **03-16-98** **034-1191-97db**

CR2E034 (10/97)