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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000039780 (7)

TRAFFIC BUILDERS OF AMERICA, INC.

| 3590 NW 54TH ST SUITE 6 FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2d. Mailing Address 2f. Certificate of Status Desired Fee Required 2f. City & State 2f. Country | | | | | | | | | |
|--|---|--|--|--|------------------------|-------------------------------|--|--|--|
| SUITE 6 FT LAUDERDALE FL \$3000 ST LAUDERDALE FL \$3000-6998 2. Principal Prince of Business 2. Ze. Maying Address 4. FEI Number Applied For National Principal Principal State Country 2. Principal Principal State Country 3. Principal Principal Principal State Country 4. Principal Pri | Principal Place of Business Mailing Address | | | | | | | | |
| ## Applied For Charge Report All Differences 2a. Marring Address 2b. Marring Address 4. FEI Number Applied For Charge Report | 3590 NW 54TH | I ST | 3590 NW 54TH | | | | | | |
| 3. Date incorporated or Qualified OLAS (1986) 1986 2. Find pol Flace of five noise | | I F EL 00000 | | | | | | | |
| Prince per Place of Flux noss 2x Mailing Address 4x FET Number Mapped For More Applicable More Applicabl | FI LAUUENUA | LE PL 33308 | FI CAUDERDALI | FI CAUDENDALE FE 33308-0300 | | | 3. Date Incorporated or Qualified | 3a. Date of Last Report | |
| SAPE Applicable SAPE Appli | | | | | | | | | |
| Suite. Apt. #. ofc. 22 22 23 24 25 26 27 27 28 28 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20 | 2. Principal P | ace of Business | 2a. Mailing Add | 2a. Mailing Address | | | 4. FEI Number | Applied For | |
| Cay & Sales Cay Sales Ca | 21 | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| City & State City & State City | | #, etc | <u>├</u> | | | | 5. Certificate of Status Desired | | |
| 29 Tous Fund Contribution | | 3 | | <u> </u> | | | & Election Campaign Financing | | |
| 9. Name and Address of Current Registered Agent MCCARTINEY, SHAR I. 600 S ANDREWS AVE SUITE 503 FT LAUDERDALE FL 33301 11. Fursion to the previsions of Sections 607 0502 and 607 1508. Florida Statutes, the above named organization should of directors. I hereby accept the approised of officer or registered agent, or both in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered diffect or registered agent, or both in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered officer or registered agent. Or both in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered officer or registered agent. Or both in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered officer or registered agent. Or both in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. Or both in the State of Florida, Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. Or both in the purpose of change its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of change its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered agent. Or both in the purpose of changing its registered | 23 | | 28 | | | | 1 | | |
| Section Sect | Zip | Country Zip | | | | | | | |
| MCCARTNEY, SHARI L 600 S ANDREWS AVE SURE 503 FT LAUDERDALE FL 333001 80 City FL UP FL 05 Zip Code 11. Pursuant to titis provisions of Sections 807 0502 and 607 1506. Florids Statute, the above harmonic corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Fiorids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent attractive accept the appointment as registered office or registered agent attractive accept the appointment as registered office or registered agent attractive accept the appointment as registered office or registered agent attractive accept the appointment as registered office or registered agent attractive accept the appointment as registered profit as registered agent attractive accept the appointment as registered profit as registered agent attractive accept the appointment as registered office or registered agent attractive accept the appointment as registered a | 24 | | | 30 | <u> </u> | | | | |
| MICARTIES, SUPE 1, SOUR LESS AND REWS AVE SUITE 503 FT LAUDERDALE FL 33301 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code City FL 85 Z | | | rent Hegistered Agent | | 81 | Name | 10. Name and Address of New He | Bistelec Whell | |
| SUITE 503 FT LAUDERDALE FL 33301 84 CRy FL 85 Zip Code 11. Furshant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and refer to the provisions of Section 607 0506, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 11. The CARTINEY, JAMES I STREET ADDRESS IN 13 STREET ADDRESS IN 12 IN 18 IN 18 SUITE 6 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 14. Libberdale FL 33309 15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 16. D STREET ADDRESS IN 13 STREET ADDRESS IN 12 IN 18 IN 18 SUITE 6 15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 10. D STREET ADDRESS IN 18 SUITE 6 10. STREET ADDRESS IN 18 SUITE 6 | | | | | | | | | |
| FT LAUDERDALE FL 33301 63 | | | | 82 Street Ac | | Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| 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 agent, or both, in the State of Horida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and faceby the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ITIE D | | | | 83 | | | | | |
| The 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 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 and mention with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. LIVE STATE ADDRESS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. INITIAL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. Change Addition AND OFFICERS AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DI | | | | | 84 | City | | 85 Zip Code | |
| 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 and framhar with, and accept the obligations of, Section 607.0566, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 IT I | | | | | | <u> </u> | | FL | |
| Signature lyanget or providenced general adaptication ROTE Replaised Agene (lightware required when releasable) OATE | office or r | edistered agent, or both, in the St | ate of Fiorida. Such char | nge was auth | orized by | the corpora | poration submits this statement for the p tion's board of directors. I hereby accep | ourpose of changing its registered of the appointment as registered | |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LITE D | SIGNATURE | <u></u> | | 21075 | | | | | |
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| 14. Too 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 al al a | 114 1 | | | | 14 (6 14 14 14 14 14 14 14 14 14 14 14 14 14 | |
| | 14. T do herel informatio | by certify that the information supp in indicated on this annual report | oned with this filing does or supplemental annual | not quality for report is true | or the exe and acci | mption state trate and tha | o in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega | s. I turther certify that the il effect as if made under oath; that | |

Date

Daytime Phone #