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 # P96000054487 (9)

FILED Apr 17 1998 8:00am Secretary of State

NEW M Principal Plac 650 TULIP TR BOCA RATON	EDIA GROUP, INC. e of Business REE LANE	Mailing Address 650 TULIP TREE LANE BOCA RATON FL 3346		DO NOT WRITE IN TH 3. Date Incorporated or Qualified 06/26/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0680479	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zιρ	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	[30]	Personal Property Tax due June 30.	☐ Yes ☐ No
	9, Name and Address of Curre TURA, GERALDINE E	ur veðistelen Våeur	81 Name	10. Name and Address of New Register	on with an in
650	O TULIP TREE LANE CA RATON FL 33486		82 Street Add 83 84 City	ress (P.O. Box Number is Not Acceptable)	85 Zip Code
office or r agent. I a SIGNATURE	Signatore, typed or printed name of registered ag		s authorized by the corporal Florida Statutes. OTE Registered Agent signature requi	poration submits this statement for the purposition's board of directors. I hereby accept the red when reinstaling) ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS.	E
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	TOTURA, GERALDINE E		1.2 NAME		
STREET ADDRESS	650 TULIP TREE LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	BOCA RATON FL 33486	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Additio
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Additio
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY-S1-ZIP		——————————————————————————————————————	3.4 CITY-ST-ZIP		
TIFLE		[_] DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 C(TY - ST - Z(P) 5.1 T(TLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		_ , _
STREET ADDRESS					
			6.3 STREET ADDRESS		

14. Thereby 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 suppliemental 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 receivor 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:

Graldine & Dt

4/9/98 (Su)367-7297