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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

NAME

STREET ADDRESS

SIGNATURE:

CITY - S1 - Zif

DOCUMENT # P96000057438 (9)

MAGNUM PUBLISHING COMPANY

Principal Place of Business Mailing Address BOI NW 37TH AVENUE 801 NW 37TH AVENUE DELRAY BEACH FL 33445-1920 **DELRAY BEACH FL 33445** Sa. Date of Last Report 3. Date Incorporated or Qualified 07/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0682637 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, 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 П 23 Added to Fees 28 Trust Fund Contribution Country Country Zφ This corporation has liability for intangible tax under s. 199,032, Florida Statutes Yes No

10. Name and Address of New Registered Agent 30 24 25 29 9. Name and Address of Current Registered Agent 81 Name WASSERSTROM, KEITH 515 EAST LAS OLAS BOULEVARD 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1500** 83 FORT LAUDERDALE FL 33301 84 City Zip Code 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 Statules. SIGNATURE Signature. Typed or proted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition 1.1 TITLE TIFLE PÉRLMAN, JEFF 1.2 NAME 2E034 NAMA 801 NW 37TH AVENUE 1.3 STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33445** 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 2.1 TITLE Change Addition THE BRADY, KEVIN 22 NAME NAME 801 NW 37TH AVENUE 2.3 STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33445** 2 4 CiTY-ST-ZIP CITY-SI-ZIP DELETE Change Addition 31 TITLE TITLE D/3/1 REISKIND, STEVEN 32 NAME NAME **801 NW 37TH AVENUE** 3.3 STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33445** 3.4. CITY - ST- ZIP CITY-ST-ZIP ... DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET LADORESS 4.4 CITY - ST - ZIP CITY - \$1 - 21P DELETE Channe Addition 5.1 TITLE TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CHTY - ST - 71P DELETE Addition Change THLE 6.1 TITLE

6.2 NAME

14. I do 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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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