

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90163 018 ***158.75

DOCUMENT # P96000060351

1. Entity Name
MIAMI BROADCAST CENTER, INC.

① ✓



Principal Place of Business
**7355 N.W. 41 STREET
MIAMI FL 33166**

Mailing Address
**7355 N.W. 41 STREET
MIAMI FL 33166**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0692874**

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GEISLER, DAVID
117 NE 73RD ST.
MIAMI FL 33138**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to: Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEISLER, DAVID 9341 COLLINS AVENUE #402 MIAMI BEACH FL 33154	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David Geisler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-21-03

Date

(305) 593-6911

Daytime Phone #

Attachment
90141951



July 2, 2003

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Document No. P96000060351 and P02000037330

To Whom It May Concern:

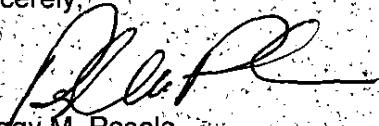
We received today, the second notice for 2003 Uniform Business Report for the corporation Miami Broadcast Center, Inc., Document No. P96000060351, and DXR Media, Inc., Document No. P02000037330. We phoned your office to inquire the reason for the notice, since we filed the original reports back in April 21, 2003.

We have learned you have no records of receipt of our reports and/or our payment. We checked with our bank and the check has not yet cleared. It seems the envelope is lost in the mail. As such, we were instructed by your office to make a copy of the original report and issue another check for payment.

Attached, please find new payments for Miami Broadcast Center and DXR Media, along with a copy of the original Check No. 6829, issued on April 21, 2003, in the amount of Three Hundred Seventeen Dollars and Fifty Cents (US\$317.50), as payment for both companies and a copy of the report for Miami Broadcast Center, Inc. Unfortunately, we did not make a copy of the original report for DXR Media, Inc., in error, therefore we are submitting the second notice report signed for your records.

We trust the information contained herein satisfies our obligation. We understand that should you receive the original check any any time, we shall receive a refund for the overpayment. We regret any inconvenience caused by this mishap. We thank you in advance for your patronage and understanding.

Sincerely,



Reggy M. Pesola
Controller