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Apr 30 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000067068 (2)

1. Corporation Name  
SPEECHLESS ADVERTISING AGENCY, INC.



Principal Place of Business  
1417 S.W. 2ND STREET  
SUITE 3  
FT. LAUDERDALE FL 33312

Mailing Address  
1417 S.W. 2ND STREET  
SUITE 3  
FT. LAUDERDALE FL 33312-1580

3. Date Incorporated or Qualified  
08/12/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1417 SW 2 Street

26 1417 SW 2 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 3

27 3

City & State

City & State

23 Ft. Lauderdale, FL

28 Ft. Lauderdale FL

Zip

Zip

24 33312

29 33312

Country

Country

25 USA

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SACOFF, DEREK  
1417 S.W. 2ND STREET  
SUITE 3  
FT. LAUDERDALE FL 33312

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BARNES, GREGORY  
2050 DOUGLAS ROAD, SUITE 212A  
PEMBROKE PINES FL 33024

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SACOFF, DAVID  
1417 S.W. 2ND STREET, SUITE 3  
FT. LAUDERDALE FL 33312

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SACOFF, DEREK  
1417 S.W. 2ND STREET, SUITE 3  
FT. LAUDERDALE FL 33312

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETED

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETED

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DELETED

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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: DEREK SACOFF

CR2E034 (9/96)