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 # P97000014787 (0)

INNOVATIVE BROADCASTING CORP.

FILED
May 11 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address					. iabiiât iik ibisi sabii	40111 40111 (010) 11	111 atal) (2001 (4)	11 (62) (65)
G/O 836 MINO CORAL GABLES		C/O 338 MINORCA AVENI CORAL GABLES FL 33134			DO NOT	WRITE IN THIS	SPACE	
					3. Date Incorporated or Qua	alified		
5 5 5 5 1 DI		- 1 A. 10.00 A.			02/14/1997			
2. Principal Pla 21 9513	SW 18 Terr Home	26. Mailing Address 26. 9573 SW 18	TWI		4. FEI Number 28 - 4L	193	No	oplied For of Applicable
Suite, Apt. #	, 9 IC.	Suite, Apt. #, etc.			5. Certificate of Status Desir	red 🔲	\$8.75 / Fee Re	
City & State	1	City & State	·		6. Election Campaign Finan	ncing	\$5.00	May Be
23	nami Ma.	28 MIWI	tla:		Trust Fund Contribution		Added 1	to Fees
Zip 3316	OS Country USA.	29 33165	Country SA		6. This corporation owes or Personal Property Tax du			tangible] No
241	9. Name and Address of Current		301		10. Name and Address of N			
FERI	RER, JUAN CARLOS		81 Name	1	ANCE F	211		
338	MINORCA AVENUE		82 Strept A	Addres	ss (P.O. Box Number & Not Ac	ceptable)		
COR	VAL GABLES FL 33134		83 - 43	2 1	3 SW 10	14		
					·			<u> </u>
	^		84 City	116	M1714	F!		3165
11. Pursuant to	the provisions of Socians 607 0502 gistered agent, or both, in the State of	and 607.1508, Florida Statule of Florida, Such change was a	es, the above-named outhorized by the corp	corpor	ration submits this statement for submits this statement for submits the statement for submits and submits the submits and submits the submits and submits the submits and submits are submits and submits and submits and submits and submits and submits are submits and submits and submits and submits are submits and submits are submits and submits are submits and submits and submits are submits and submits are submits and submits are submits and submits and submits are sub	or the purpose y accept the ar	of changing it pointment as	s registered registered
agent. I am	familiar with, and a cept the obligat	ions of, Section 607.0505, Flor	rida Statules.		ŧ	1/20/9	8	-
SIGNATURE S	Signature typerf or printed half of registered agent	and the if applicable (NOTE	Registered Agent signature r	parcpar	when reinstating)	TIO DITE	7	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO	OFFICERS AN		
TITLE	D	DELETE	1.1 TITLE	e.		/	Change	Addition
NAME	GIL, LANCE		1.2 NAME	(5	310 LUANCI	=		
STREET ADDRESS	C/O 338 MINORCA AVENUE CORAL GABLES FL 33134		1.3 STREET ADDRESS	45		2216	ς	
CITY-ST-ZIP TITLE	CONAL GABLES PL 33134	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		TIONI PLA	<u></u>	Change	Addition
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STREET ADDRESS			3.3 STREET ADDRESS					
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CITY-ST-ZIP		T oriest	5 4 CITY - ST - ZIP				Channe	Addition
TITLE		DELETE	6 1 TITLE				L Change	Addition
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STREET ADDRESS			6.3 STREET ADDRESS 6.4 CITY - ST - ZIP					i
14. I hereby ce	ertify that the information supplied wit	h this filing does not qualify to	r the exemption stated	d in Sc	oction 119.07(3)(i), Florida Sta	tutes. I further (ertify that the	information
indicated o officer or di Block 12 or	on this annual report or supplemental irector of the corporation or the rector r Block 13 if changed, or on the after r Block 13 if changed, or on the after the control of the control	annual report is true and accuver or trustee empowered to eliminate with an address.	urate and that my sign execute this report as	nature require	ad by Chapter 607. Florida St.	atutoe and that	I mour name and	poore in
officer or director of the corporation of 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 the attachment with an address.								