FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90074 050 ***150.00

DOCUMENT #	P97000019101
Corporation Name	1 01 0000 10 10 1

FROM M	EDIA TO YOU, INC.			the second of the second of the second			
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Principal Place	of Business	Mailing Address		((\$30,50 (10)50) (00) (00) (00)),		
412 HENDRICK FORT LAUDERD		412 HENDRICK ISLE #2 FORT LAUDERDALE FL 33301		DO NOT WRITE IN THIS S	SPACE		
1				3. Date Incorporated or Qualifed			
)				02/24/1997		}	
2. Principal Pl	ace of Business N. F. 7 th Ave.	2a. Mailing Address 26 638 N.E.	7th Ave	4. FEI Number 65-0734761	Applied Not App		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition		
City & State	Laud. FL	City & State 28 Ff. Lava	1., FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fee		
Zip	Country	Zip	Country	8. This corporation owes the current year Intai	ngible	/	
²⁴ 3331	24 25 Broward	29 33304 3	Browan	Personal Property Tax.	Yes DM	<u></u>	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81. Name 20. July 20. July 20. Name 21. July 20. Jul							
BACI	KAL, ELAINE] -]	Backal, Elaine			
	HENDRICK ISLE #2		82 Street A	ddress (P.O. Box Number is Not Acceptable)		}	
l	LAUDERDALE FL 33301		83	38 N. L. I AVE			
10				+ Land, FL 3.	3.3 <i>0</i> /		
			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	Flaire H-1	Backel		4/2/	199]	
	Signature, typed or printed name of registered agent a		egistered Agent signature rec	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	N 12	
12.	PD OFFICERS AND	DELETE	13.	PD		Addition	
NAME .	BACKAL, ELAINE	<u></u>	1.2 NAME	Backel, Elaine		·	
STREET ADDRESS	412 HENDRICK ISLE #2		1.3 STREET ADDRESS	638 N. E 7+1 AL		ĺ	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301		1.4 CITY-ST-ZIP	Ft. Laudy FL 33304			
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐	Addition	
NAME	BACKAL, MILTON		2.2 NAME			ĺ	
STREET ADDRESS	2386 VALERA AVENUE		2.3 STREET ADDRESS			(
CITY-ST-ZIP	PITTSBURGH PA 15210		2.4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TILE		Change	Addition	
NAME (3.2 NAME			ļ	
STREET ADDRESS			3.3 STREET ADDRESS			ļ	
CITY-ST-ZIP			3.4. CITY+ST-ZIP		Change	7 Addition	
TITLE		☐ DELETE	4.1 TITLE		Change [] Addition [

6.4 CITY-ST-ZIP 14. 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 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 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, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY+ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIE

CITY-ST-ZIP

DELETE

DELETE

☐ Change

☐ Addition

Change ____ Addition