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

PROFIT CORPORATION ANNUAL REPORT

1998

22

23

24

Zip

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State . • DIVISION OF CORPORATIONS

DOCUMENT # P97000042738 (9)

AMERICAN MEDIA MARKETING, INC.

Country

9. Name and Address of Current Registered Agent

25

801 N.E. 167TH STREET

SUITE 300

UNITED CORPORATE SERVICES INC.

Principal Place of Business

** UNITED CORPORATE SERVICES INC

** UNITED CORPORATE SERVICES INC

***801 N.E. 167TH STREET SUITE 300

N MIAMI BEACH FL 33162

***201

***201

***202

***203

***301

***203

***301

***302

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

***303

*

City & State

Zip

28

29

FILED Mar 13 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

K)

X Yes

(521) 540-1000

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□ No

Not Applicable

3. Date Incorporated or Qualified

05/14/1997

65-0757297

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

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

4. FEI Number

N MIAMI BEACH FL 33162		83				
			84	City	FL 85 Zip Co	de
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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS						NI 12
TITLE	PRESIDENT / DIRECTOR	DELETE	1.1 TITLE			Addition
		Detrie	1.2 NAME		C Other E	
NAME	MICHAEL J. BOYLAN				!	19
STREET ADDRESS	600 E COAST AVE.		1.3 STREET			ļ
CITY-ST-ZIP	LANTANA, FL 33462		1.4 City - S	T-ZIP		1 4 7 7 7 7 7
TITLE	VP/SEC./TREAS./DIR.	LE DELETE	2.1 TITLE		Change [Addition
NAME	MAYNARD RABINOWITZ		2.2 NAME			ł
STREET ADDRESS	600 E COAST AVE.		2.3 STREET ADDRESS			
CITY-ST-ZIP	LANTANA, FL 33462		2. 4 CITY - S	T-ZIP		
TITLE	ASS T. SEC./TREAS.	☐ DELET E	3.1 TITLE		Change [Addition
NAME	HARVEY BLICKSILVER		3.2 NAME			
STREET ADDRESS	600 E COAST AVE.		3.3 STREET	ADDRESS		j
CITY-ST-ZIP	LANTANA, FL 33462		3.4. CITY-S	T-ZIP		
TITLE	•	DELETE	4.1 THILE		☐ Change ☐	Addition
NAME	DIRECTOR		4. 2 NAME	Į		
STREET ADDRESS	PETER J. CALLAHAN		4.3 STREET	ADDRESS		
CITY-ST-ZIP	600 E COAST AVE.		4.4 CITY+SI	r-ZIP		
TITLE	LANTANA, FL 33462	DELETE	5.1 TITLE		☐ Change ☐	Addition
NAME		Ï	5.2 NAME	Ì		1
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST	r-ZIP		·
TITLE		DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		ľ
CITY-ST-ZIP			6.4 CITY-SI			
Thereby 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.						

Country

30