

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

98 NOV 30 PM 1:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000043362
1. Corporation Name FINANCIAL MEDIA DISTRIBUTION INC.

Principal Place of Business Mailing Address
1280 SW 36th AVE. SUITE 200
POMPANO BEACH, FL. 33069

REINSTATEMENT 98

2. Principal Place of Business 21 <u>1280 SW 36th AVE</u> Suite, Apt. #, etc. <u>#200</u> City & State <u>POMPANO BEACH FL</u> Zip <u>33069</u> Country <u>US</u>	2a. Mailing Address 26 <u>1280 SW 36th AVE</u> Suite, Apt. #, etc. <u>#200</u> City & State <u>POMPANO BEACH FL</u> Zip <u>33069</u> Country <u>US</u>
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3. Date Incorporated or Qualified <u>05-15-97</u>	4. FEI Number <u>65-0759816</u>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
WILLIAM D. SEIGLER JR.
5580 NW 61ST ST. #615
COCONUT CREEK FL. 33073

10. Name and Address of New Registered Agent
81 Name N/A
82 Street Address (P.O. Box Number is Not Acceptable) N/A
83 City FL 85 Zip Code FL

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 William D. Seigler Jr. PRES. DATE 11/25/98

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<u>PRESIDENT</u>	1.1 TITLE	<u>300002704033</u>
NAME	<u>WILLIAM D. SEIGLER JR.</u>	1.2 NAME	<u>-12/04/98 - 01113-020</u>
STREET ADDRESS	<u>5580 NW 61ST ST. #615</u>	1.3 STREET ADDRESS	<u>****758.75 ****758.75</u>
CITY-ST-ZIP	<u>COCONUT CREEK FL 33073</u>	1.4 CITY-ST-ZIP	
TITLE	<u>VICE PRES.</u>	2.1 TITLE	
NAME	<u>WM. D. SEIGLER JR.</u>	2.2 NAME	
STREET ADDRESS	<u>SAME</u>	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<u>SECRETARY</u>	3.1 TITLE	
NAME	<u>WM. D. SEIGLER JR.</u>	3.2 NAME	
STREET ADDRESS	<u>SAME</u>	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<u>TREASURER</u>	4.1 TITLE	
NAME	<u>WILLIAM D. SEIGLER JR.</u>	4.2 NAME	
STREET ADDRESS	<u>SAME</u>	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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, for original attachment with an address.

SIGNATURE: William D. Seigler Jr. PRES.

11-25-98 954-984-5800

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/98)