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 #

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP_

STREET ADDRESS

CITY-ST-ZIP

TITLE

TITLE

NAME

TITLE

NAME

P97000047912 (5)

CD PROMO, INC.

Principal Pla	ce of Business	Mailing Addres						
		ŭ	U					
3500 ALOMA AVE., SUITE F9 WINTER PARK FL 32792			3500 ALOMA AVE., SUITE F9 WINTER PARK FL 32782			1		
		WINIER PARK				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						05/29/1997		
2. Principal Place of Business 21 Sulte, Apt. #, etc. 22		2a. Mailing Add	2a. Mailing Address 26 Suite, Apt. #, etc. 27				plied For	
		26				No	t Applicabl	
						5. Certificate of Status Desired S8.75 Additional Fee Required		
		27						
City & Sta	ite	City & State)			6. Election Campaign Financing \$5.00	May Be	
23		28				Trust Fund Contribution Added t		
Zip	Country	Zip	C	ountry	,	a. This corporation owes or has paid the current year Inte	angible	
25		29	29 30			Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
TARABA, JOSEF				81	Name			
	00 ALOMA AVE., SUITE F9				82 Street Address (P.O. Box Number is Not Acceptable)			
	NTER PARK FL 32792							
	HILLIAM IL DEIDE							
.,,				83				
•••								
•				83 84	City	F1 85 Zip 0	Code	
11 Pureuan	t to the provisions of Sections 607	.0502 and 607.1508. Flo	rida Statutes, the	84	e-named c	ornoration submits this statement for the purpose of changing its	s registered	
11. Pursuan	registered agent or both, in the 9	State of Elorida, Such cha	inge was authoriz	above	e-named c	FL `	s registered	
11. Pursuan office or agent. I	registered agent, or both, in the S am familiar with, and accept the c	State of Elorida, Such cha	inge was authoriz	above	e-named c	ornoration submits this statement for the purpose of changing its	s registered	
11. Pursuan	registered agent, or both in the Sam familiar with, and accept the c	State of Florida Such cha obligations of, Section 60' ed agent and tille if appression	inge was authoriz 7.0505, Florida St	above red by tatutes	e-named c the corpo	ornoration submits this statement for the purpose of changing its	s registered	
11. Pursuan office or agent. I	registered agent, or both finithe S am familiar with, and accept the c Signature system or printed name of register OF LICERS	State of Florida Such cha obligations of, Section 60 and agent and tile if applicable S AND DIRECTORS	inge was authoriz 7.0505, Florida St (NOTE Begiste	above red by tatutes	e-named c the corpo	orporation submits this statement for the purpose of changing its pration's board of directors. I hereby accept the appointment as a required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE	registered agent, or both lin the Sam familiar with, and accept the dissipation by the distribution of the state of the same o	State of Florida Such cha obligations of, Section 60 and agent and tile if applicable S AND DIRECTORS	inge was authoriz 7.0505, Florida St (NOTE Registe	above red by tatutes	e-named c the corpo	orporation submits this statement for the purpose of changing its ration's board of directors. I hereby accept the appointment as	s registered registered	
11. Pursuan office or agent. I SIGNATURE	registered agent, or both in the Sam familiar with, and accept the c Signature typed or printed name of register OF LICE AS D TARABA, JOSEF	State of Frontia. Such cha obligations of, Section 60 ediagent and title if application S AND DIRECTORS	Inge was authoriz 7.0505, Florida St (NOTE Registr 13 DELETE 1.3	above red by tatutes	e-named c the corpo	orporation submits this statement for the purpose of changing its pration's board of directors. I hereby accept the appointment as a required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE	registered agent, or both in the Sam familiar with, and accept the dissipation by the displace of the control o	State of Frontia. Such cha obligations of, Section 60 ediagent and title if application S AND DIRECTORS	(NOTE Registe (NOTE Registe 13 DELETE 12	above red by tatutes ared Age	e-named c the corpo	orporation submits this statement for the purpose of changing its pration's board of directors. I hereby accept the appointment as a required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME	registered agent, or both in the Sam familiar with, and accept the c Signature typed or printed name of register OF LICE AS D TARABA, JOSEF	State of Frontia. Such cha obligations of, Section 60 ediagent and title if application S AND DIRECTORS	(NOTH Registre 1.3 CELETE 1.3 12 1.3	above red by tatutes ared Age	e-named c y the corpo s. ent signature re	orporation submits this statement for the purpose of changing its pration's board of directors. I hereby accept the appointment as a required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE 12. IITLE NAME STREET ADDRESS	registered agent, or both in the Sam familiar with, and accept the constraint of register OF LICERS D TARABA, JOSEF 3500 ALOMA AVE., SUITE	State of Frontia. Such chability and such chability of Section 60 and such chapters of the Proposition of Section 1997. The Proposition of the Pro	(NOTE Registre 1.3 CELETE 1.3 1.4	above red by tatutes ared Age TITLE NAME	e-named c y the corpo s. ent signature re	orporation submits this statement for the purpose of changing its pration's board of directors. I hereby accept the appointment as a required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both in the Sam familiar with, and accept the discount familiar with, and accept the discount familiar with and accept the discount familiar with a second familia	State of Frontia. Such chability and such chability of Section 60 and such chapters of the Proposition of Section 1997. The Proposition of the Pro	(NOTH Registre 1.3 PELETE 2.1	above red by tatutes ared Age 3. TITLE NAME STREET	e-named c y the corpo s. ent signature re	orporation submits this statement for the purpose of changing its oration's board of directors. I hereby accept the appointment as required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Change	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both in the Sam familiar with, and accept the contamiliar with a support of the contamiliar with, and accept the contamiliar with a support of the contamiliar with a s	State of Frontia. Such charbobligations of, Section 60 and Industrial State of Section 60 and Industrial Section 60 and In	(NOTH Registre 1.3) (NOTH Registre 1.3) DELETE 1.3 1.4 DELETE 2.1	above red by tatutes red Age 3. TITLE NAME STREET CITY-S TITLE	e-named c y the corpo s. ent signature re	orporation submits this statement for the purpose of changing its oration's board of directors. I hereby accept the appointment as required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Change	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both in the Sam familiar with, and accept the contamiliar with a second or particular of the contamiliar with a second or particular o	State of Frontia. Such charbobligations of, Section 60 and Industrial State of Section 60 and Industrial Section 60 and In	(NOTH Registre 1.3 CELETE 1.3 DELETE 2.1 Additional State of the second seco	above ed by atutes red Age 3. TITLE NAME STREET CITY-S TITLE NAME STREET	e-named c y the corpo s. ant signature re ADDRESS ST-ZIP	orporation submits this statement for the purpose of changing its oration's board of directors. I hereby accept the appointment as required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Change	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both in the Sam familiar with, and accept the contamiliar with a support of the contamiliar with, and accept the contamiliar with a support of the contamiliar with a s	State of Frontia. Such chability and the obligations of, Section 60 and the day realized SAND DIRECTORS F9	MOTH Registre (NOTH Registre 1.3	above red by tatutes red Age 3. TITLE NAME STREET CITY-S TITLE	e-named c y the corpo s. ant signature re ADDRESS ST-ZIP	orporation submits this statement for the purpose of changing its oration's board of directors. I hereby accept the appointment as required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Change	s registered registered S IN 12	
11. Pursuan office or agent. I SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both in the Sam familiar with, and accept the contamiliar with a second or particular of the contamiliar with a second or particular o	State of Frontia. Such chability and the obligations of, Section 60 and the day realized SAND DIRECTORS F9	(NOTH Registre 1.1) (NOTH REGISTRE 1.1) (NOTH REGISTRE 1.1) 12 1.3 1.4 DELETE 2.1 2.2 2.3 2.4 DELETE 3.1	above d by	e-named c y the corpo s. ant signature re ADDRESS ST-ZIP	orporation submits this statement for the purpose of changing its reation's board of directors. I hereby accept the appointment as required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Change	s registered registered S IN 12 Additio	

64 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, or on an attaghment with an address.

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS 4.4 CITY - S1 - ZIP

4.1 TITLE 4. 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

DELETE

DELETE

DELETE

1000

17 171 1/11

Change

Change

Addition

Addition

Addition

2E034 (10/97)

FILED

May 15 1998 8:00am

Secretary of State

u nedričen kie všeki nesia gerik edili čekla gerik edili čekla ezek azek kelek krele krej krej tek