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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P9700050480 1. Corporation Name

AMERICAN IMMIGRATION MEDIA GROUP, INC.

A CONTINUE OF BERTH LEADER BOTT ORBIT ANTIC BRITA BRITA BRITA ANTIC AND CONTRACT CON

FILED

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90031 039 ***150.00

Principal Place	of Business	Mailing Address			at MBatt dater abert Abitt bibbt :	W WB
1000 BRICKELL		1000 BRICKELL AVENUE #5	20			
MIAMI FL 33131		MIAM! FL 33131		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed		
				06/06/1997		
2. Principal Pla	ace of Business	2a. Mailing Address	,	4. FEI Number	Apr	olied For
27 1000	BRICKELL AVE	26 1000 Bris	bell Are	65-0770079	No1	Applicable
Suite, Apt. #		Suite, Apt. #, etc.	40		\$8.75 A	I
City & State	1040	City & State	-1 -			
23	MIGM FL	- 28 Wilh		6. Election Campaign Financing Trust Fund Contribution	\$5.00 i	
Zip 021	2) Country	1 - Zip ~ 2 131 5	Country	8. This corporation owes the curre	· <u>-</u>	
24 77	1 25 WV	J	30 US 15	Personal Property Tax.		□No
	9. Name and Address of Curr	rent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent	
RRAI	JWERMAN, JEFFREY N			Drawlynon, (R)	filly N.	
	BRICKELL AVENUE #520		82 Street Ad	Idress (P.O. Box Number is Not Accepta	ble) // ///	10
1	II FL 33131		83 2 2	10 10 10 10 10 10 10 10 10 10 10 10 10 1	~ +1 / U /	
				Miam		
			84 City		FL 85 Zip C	ode)
11 Pureuant t	on the provisions of Sections 607.0	502 and 607 1508 Florida Statute	s the above-named co	rporation submits this statement for the	I	registered
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was au	thorized by the corpore	ation's board of directors. I hereby accept	t the appointment as req	istered
Ū	n familiar with, and accept the ooi	gations of, Section 607.0505, Flori	ua statutes.		1/4/0	10
SIGNATURE	Signature, typed or printed name of registered	gent and title if applicable. (NOTE: I	Registered Agent signature regul	ired when siristating)	DATE //	
12.	OFFICERS	AND DIRECTORS	13.2	ADDITIONS/CHANGES TO OF	ICERS AND DIRECTOR	R\$ IN 12
TITLE	D	☐ OELETE	1.1 TITLE		Change	☐ Addition
NAME	BRAUWERMAN, JEFFREY N		1.2 NAME	a in insta		
STREET ADDRESS	1000 BRICKELL AVENUE #5	20	1.3 STREET ADDRESS	Saite 1040		}
CITY-ST-ZIP	MIAMI FL 33131 /		1.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	Brauwerman, Suzan C		2.2 NAME	Juste 1045		
STREET ADDRESS	1000 BRICKELL AVENUE #5	20	2.3 STREET ADDRESS	price (ot)		
CITY-ST-ZIP	MIAMI FL 33131		2.4 CITY-ST-ZIP		[7.0]	
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NAME			3.2 NAME			ļ
STREET ADDRESS			3.3 STREET ADDRESS			1
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TITLE		□ nëre ie	l		L1 Grands	C LOOKON
NAME			4.2 NAME 4.3 STREET ADDRESS	•		
STREET ADDRESS						
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change	Addition
NAME			5.2 NAME		5.m./g0	
STREET ADDRESS			5.3 STREET ADDRESS	·		ĺ
			54 CITY-ST-ZIP			
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME		- •	
STREET ADDRESS			6.3 STREET ADDRESS		• ,	
CITY-ST-ZIP			64 CITY-ST-ZIP			
OHT-31-4P						I

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 attachment with an address, with all other like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED N