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

DOCUMENT # P97000062059 1. Corporation Name

MOSS & STONE PUBLISHING COMPANY

Principal Place of Business Mailing Address									
5800 S.W. 51 TERRACE 5800 S.W. 51 TERRACE									
MIAMI FL 33155		MIAMI FL 33155				DO NOT WRITE IN THIS	SPACE		
						3. Date Incorporated or Qualifed	JIAOL		
						3. Date incorporated of Qualified			
2 Principal D	Nace of Rusiness	2a. Mailing Address				4. FEI Number		Applied For	
						65-0769100	+	Not Applicable	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.								Additional	
						5. Certifcate of Status Desired	·	Required	
27 27 City & State City & State						6. Election Campaign Financing	\$5.0	0 May Be	
23 28						Trust Fund Contribution	L L		
Zip	Country	Zip	Col	untry	-	8. This corporation owes the current year In	tangible		
24	25	29	30			Personal Property Tax.	Yes	□No	
£41	9. Name and Address of Current		12-1	T		10. Name and Address of New Registered	Agent		
				81	Name		-		
BOTTA, PEDRO D					Circol *	ddrose (P.O. Poy Number in Not Accentable)			
5800 S.W. 51 TERRACE				82	Street A	ddress (P.O. Box Number is Not Acceptable)			
MIAI	MI FL 33155			83	.,,				
						<u> </u>	1001 -	- 0-4-	
				84	City	FI	85 Zi	p Code	
11 Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statu	ites, the a	bove	-named o	orporation submits this statement for the purpose o	f changing	its registered	
office or r	registered agent, or both, in the State o	if Florida. Such change was	authorize	d by t	he corpo	ration's board of directors. I hereby accept the appoint	intment as	registered	
agent. I a	im familiar with, and accept the obligati	ions of, Section 607.0505, Fi	onda Sta	wes.					
SIGNATURE	Signature, typed or printed name of registered agent	end title if applicable (NO)	F: Registere	d Agent	signature re-	quired when reinstating) DATE			
12.	OFFICERS AND		13.	- · · · · ·		ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12	
TITLE	P	☐ DELETE	1.1 T	TLE		P	Chang	e 🔲 Addition	
NAME	BOTTA, PEDRO		1.2 N	IAME.		Wirdspell Terry	•		
STREET ADDRESS	FOOD OW EACH TEDD				ADDRESS	7851 NW 13TH STREET	_ ,		
	MIAMI FL 33155			ITY-ST-	710	PEMBROKE PINES, FL 330	24		
CITY-ST-ZIP	VP ,	☐ DELETE	2.1 T			VD	Chang	e Addition	
TITLE	WITHERELL, TERRY		2.2 N			BOTTA, PEDRO 5800 SW 51ST TERR			
NAME -	ZOE4 ABAL 40TH CTDEET	•			***********	5800 SW SIST TERR			
STREET ADDRESS	PEMBROKE PINES FL 33024					HIAHI, FL 33155			
CITY-ST-ZIP				CITY-ST	-ZiP	HIMMI, FL 33133	Chang	e Addition	
TITLE	VP DATATI	☐ DELETE	3.17		}			- L/100111011	
NAME	ALFONSO, RAFAEL		3.2 N						
STREET ADDRESS	1				ADDRESS				
CITY-ST-ZIP	MIAMI FL 33155			CITY-ST	-ZIP		[7] AL		
TITLE	1	☐ DELETÉ	4.1 T		Į		Chang	e	
NAME	BOTTA, CATALINA		4, 21	SMAN	İ				
STREET ADDRESS			4.3 8	TREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33177		4.4.0	TY-ST	-ZIP				
TITLE	S	☐ DELETE	5.1 T				Chang	e	
NAME	MOHAMED, KATHY ASHBY		5.2 N	IAME			_		
STREET ADDRESS	13282 SW 114TH LANE, #3		5.3 9	TREET	ADORESS		•		
CITY-ST-ZIP	MIAMI FL 33186		5.4 0	ITY-ST	-ZIP				
TITLE		☐ DELETE	6.1 T	πLE			Chang	e Addition	
NAME			6.2 N	IAME					
STREET ADDRESS			6.3 5	TREET	ADDRESS				
OINCEI MUNICOO					- 1				
CITY-ST-ZIP			6.4 0	ITY-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

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90052 009 ***158.75