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 # P98000002822

1. Corporation Name

Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90038 035 ***150.00

RADIO "I	ECLAIR", INC.								
Principal Place	o of Rusiness	Mailing Address				-{	OBŠII ODNIC KOMI	j 08 410 1001 9110	
521 NORTHEAST 38 STREET 521 NORTHEAST 38 STREET MIAMI FL 33137 MIAMI FL 33137						DO NOT W	RITE IN THIS	SCRACE	
						3. Date Incorporated or Qualife		- ACE	
						01/08/1998	J		ļ
2. Principal Place of Business (2a. Mailing Address						4. FEI Number		Арр	lied For
21 9 N.E. J451. 26						65-082046	3	Not	Applicable
Suite, Apt.#, etc. Suite, Apt.#, etc.						5. Certificate of Status Desired		\$8.75 Ad	
22 Suf # 5 27						5. Certificate of Status Desired		Fee Req	uired
City & State City & State						6. Election Campaign Financin	g 🗆	\$5.00 N	- 1
23 MAM), +C. 28						Trust Fund Contribution		Added to	Fees
			Country			8. This corporation owes the co	ırrent year In		⊒No
24 55	137 25 USA		30		 	Personal Property Tax. 10. Name and Address of New	Registered		
	9. Name and Address of Current	Registered Agent	81	Na	me	10. Name and Address of No.	, regionorou	rigeni	
MET	ELLUS, MARIE LOURDES								
521 NORTHEAST 38 STREET			82	Str	eet Addre	ess (P.O. Box Number is Not Acce	ptable)		
	MI FL 33137		83	-			-		
			<u> </u>						
			84	Cit	:y		FL	85 Zip Ci	ode
SIGNATURE	m familiar with, and accept the obligation	and title if applicable. (NOTE:	Registered Age		ature required	when reinstating)	DATE	ND DIDECTOR	-
12.	OFFICERS ANI		13.		-	ADDITIONS/CHANGES TO C	FFICERS A	ND DIRECTOR	Addition
TITLE	D	☐ DELETE	1.1 TITLE					Change	
NAME	METELLUS, MARIE LOURDES		1.2 NAME						
STREET ADDRESS	521 NORTHEAST 38 STREET		1.3 STREE		(ESS)				}
CITY-ST-ZIP	MIAMI FL 33137	□ DELETE	1.4 CITY-S 2.1 TITLE	I-ZIP	+		_	Change	Addition
TITLE		- Detter	2.2 NAME						ا يجدر
NAME STREET ADDRESS			2.3 STREE	T ADDF	RESS				٠,
CITY-ST-ZIP	2.4		2. 4 CITY-					` <u></u> ',	
TITLE			3.1 TITLE					Change	Addition
NAME			3.2 NAME						•
STREET ADDRESS			3.3 STREE	T ADDA	RESS				
CITY-ST-ZIP			3.4. CITY-5	T-ZIP					- Addition
TITLE		☐ DELETE	4.1 TITLE			•		☐ Change	☐ Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE		RESS				
CITY-ST-ZIP		☐ DELETE	4.4 C/TY-S	T-ZIP	 	<u></u>		☐ Change	☐ Addition
TITLE		☐ OETEIE	5.1 TITLE 5.2 NAME					Gridings	
NAME			5.3 STREE	T ADDE	RESS				
STREET ADDRESS			5.4 CITY- S					•	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE					☐ Change	☐ Addition
NAME			62 NAME						
STREET ADDRESS			6.3 STREE	T ADD	RESS				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP					

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: