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Feb 22, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000004248

1. Corporation Name

PERIODICAL READERS' SERVICE, INC.

								1 2 1 1 1 1 1 2 1 1 1 1			9 1 9 1 	(110) 1 11 121 110 111 101
Principal Place	of Business	M	ailing Address	_				1 (64)(0))	IONE BUILDEN	SSIII BIEID II BII	Alban (S)(IAB)
· · · · · · · · · · · · · · · · · · ·			5 W CYPRESS CREEK ROAD									
STE 204 STE 204								DO NOT WRITE IN THIS SPACE				
FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309								DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
							ļ	01/14/19		,		ļ
2 Principal DI	ace of Business		. Mailing Address	_			-+	4. FEI Numbe	<u>r</u>		An	plied For
21	acc of Edolifeon	26	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					65-080	3288			t Applicable
Suite, Apt. :	#, etc.	1201	Suite, Apt. #, etc.					- 0	f Status Danisad		\$8.75	Additional
22			27				5. Certificate o	f Status Desired		Fee Re	equired	
City & State			City & State				6. Election Ca	mpaign Financing	' П	\$5.00		
23	<u></u>	28							Contribution		Added	to Fees
Zip	Country	<u> </u>	Zip	Coun	try			•	ation owes the cu	rrent year In	tangible XYes	□No
24	25	29		30				Personal Pr		Begistered		
	9. Name and Address of Curren	t Regis	stered Agent		B1	Name		10. Name and	Address of New	Registered	Agent	
GOLI	DING, STEPHEN M				•				_			
	W CYPRESS CREEK ROAD			[82 Street Address (P.O. Box Number is Not Acceptable)							
STE				}	83				_			
	AUDERDALE FL 33309				"							
,,,	ACDENDALE I E COCCO				B4	City			<u> </u>	FL	85 Zip	Code
44 5	to the provisions of Sections 607.050	2	207 1E09 Florida Statut	oc the ab		n.named	Logrnora	ation cubmits thi	s statement for th		= } [changing its	registered
office or re	ogistered agent or both in the State i	of Florid	da. Such change was a	uthorized	bv.	the corpo	oration's	s board of direct	tors. I hereby acc	ept the appo	intment as re	gistered
agent. I ar	m familiar with, and accept the obligat	ions of	, Section 607.0505, Flo	rida Statui	es.				,			1
SIGNATURE	Signature, typed or printed name of registered agen		if -anicoble (NOTE	· Danieterad I	nen	nt eigneture re	required wh	hen reinstating)	.	DATE		}
12.	Signature, typed or printed name of registered agen			13,	yen	it signature it	required with		CHANGES TO O		ND DIRECTO	ORS IN 12
TITLE	D		☐ DELETE	1.1 ΠΠ	E						Change	Addition
NAME	KAHN, ROBERT			1.2 NAN	Æ	}	Kat	nn Family	Limited	Yav the	rship	
STREET ADDRESS	9621 W SAMPLE ROAD			1.3 STF	EET	ADDRESS	147:	5 w. Ly	bress Creel	< R8.	#204	
CITY-ST-ZIP	CORAL SPRINGS FL 33065			1.4 C/IT	/- ST	T-ZiP	F7	+, Laude		L 33	53 <i>09</i> '	·
TITLE	D		☐ DELETE	2.1 TITL							Change	Addition
NAME	BERCIK, ROBERT			2.2 NAM	Æ						•	
STREET ADDRESS	962 W SAMPLE ROAD			2.3 STF	EET	TADDRESS	960	35				
CITY-ST-ZIP	CORAL SPRINGS FL 33065			2. 4 CIT	Y-S	ST-ZIP						
TITLE	<u> </u>		☐ DELETE	3.1 TiTt	E						Change	☐ Addition
NAME				3.2 NAI	ÆΕ							Ì
STREET ADDRESS				3.3 STF	REE1	TADORESS	:	•				
CITY-ST-ZIP				3.4. CIT	Y-S	ST-ZIP						
TITLE			☐ DELETE	4.1 TITU	E.						☐ Change	Addition
NAME				4. 2 NA	ME							
STREET ADDRESS				4.3 STF	EET	TADDRESS	:					
CITY-ST-ZIP				4.4 CIT	/- S7	T-ZIP						
TITLE			☐ DELETE	5.1 TITI		Ì			,		☐ Change	Addition
NAME				5.2 NA								
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CITY-ST-ZIP				5.4 CIT		T-ZIP	ļ		_			
TITLE			☐ DELETE	6.1 TITE							Change	☐ Addition
NAME				6.2 NA						•		1
PERCET ADDOCCO				■ 6.3 STF	ŒET	Taddress i	;					1

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 ampowered.

6 4 CITY-ST-ZIP

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CITY-ST-ZIP

1-21-99

Daytime Phone #