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PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P98000008439

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

Feb 24, 1999 8:00 am Secretary of State 02-24-1999 90140 031 ***150.00

BHUAD	CAST MEDIA, INC.										
Principal Plac	ce of Business	Mailing Add	ress					IR É d an ab ne ab ne i	ABIBI (BIII BIB)	18 1111 8 1811 1881	
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42C STRATFORD LANE BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436							,				
						ļ		RITE IN THIS	SPACE		٦
						ļ	3. Date Incorporated or Qualif	ed		•	
							01/27/1998				1
2. Principal F	Place of Business 9 Puerto Blui	2a. Mailing			Blue		4. FEI Number	1912	·	pplied For	∠ إ
				740	12101		6708-4			lot Applicable	╬
_ Suite, Apt.	. #, etc.	Suite, A	ot. #, etc.				5. Certificate of Status Desired	· 🗆	•	Additional tequired	
22		27						·	 -		-
3 7 8 Sta	INTON DEACH PL	28 0 Y	N fon	Bei	,,, ,	1	6. Election Campaign Financia Trust Fund Contribution	ng 🖸		May Be to Fees	
Zip 37	437 25 Palm BeA	ch 29 331	137	io Cay	JIM Be	ach	This corporation owes the or Personal Property Tax.		Yes		
	9. Name and Address of Curre	nt Registered Ag	ent				10. Name and Address of Ne	w Registered	Agent		4
001	DOON HOWARD W			ĺ	81 Name		• .		*		1
	RDON, HOWARD W			ŀ	82 Street	Addres	s (P.O. Box Number is Not Acce	ptable)			1
	S.E. 2ND STREET										-
	H FLOOR			Ì	83						l
MIA	MI FL 33131			f	84 City				85 Zip	Code	1
	Λ	<u> </u>]			<u> </u>	F <u>L</u>	يبلك		4
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508,	Florida Statutes	s, the at	ove-named by the come	corpora tration	ation submits this statement for t s board of directors. I hereby ac	the purpose of scept the appoi	changing its	s registered egistered	
agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the object	ations of Section	507.0505, Floy	ia Statu	ites.	, i	5 554,4 5, 5, 5, 5, 5, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7,	11/1	901	_	
SIGNATURE	Derige to	Lenn		COR	ge (-1.		er_	1[17]	_/		
<u> </u>		ent and title if applicable.	(NOTE: R		Agent signature n	equired w	ADDITIONS/CHANGES TO	DATE	ID DIRECT	ORS IN 12	1 8
12.		ND DIRECTORS	DELETE	13.	16		ADDITIONS/CHANGES TO	· ·	☐ Change		1
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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: