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 #P~\S0000 25630

1. Corporation Name

TARGET OUTDOOR (US.A.), INC.

Principal Place of Business

Mailing Address

1007 NIFEDERACHUM

#111

DO NOT WRITE IN THIS SPACE

May 13, 1999 8:00 am Secretary of State

05-13-1999 90013 002 ***150.00

	R. CANOGROPA			1CE, FC		3. Date Incorporated or Qualifed			
				<u> 3</u>	74	>-/8/0.			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	App	lied For	
21		26				ARRULOD FOR	Not	Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 Ac	ditional	
22		27				5. Certifcate of Status Desired	Fee Req	uired	
City & State		City & State				6. Election Campaign Financing	\$5.00 N	lav Re	
23		28				-Trust Fund Contribution - Added to Fees			
Zip	Country	Zip	Co	untry		8. This corporation owes the current year Intan	gible		
24	25	29	30			Personal Property Tax.	∃Yes [□No	
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
				81	Name				
201	40 Kasan			-	<u> </u>	(0.0.0.1)			
7300 W. CAMINO REALHIZE				82 Street Address (P.O. Box Number is Not Acceptable)					
			4.00	83		· · · · · · · · · · · · · · · · · · ·			
Ro	CA RATION	~ L	524						
				84	City	FL	85 Zip Co	ode	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered									
office or n	egistered agent, or both, in the State of	Florida, Such change	was authorize	d by:	the corporati	on's board of directors. I hereby accept the appointment	nent as regi:	stered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								\	
12.	OFFICERS AND		[] 13.		. organic	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12	
TITLE	3.77327.37.112	☐ DELI			0		Change	Addition	
NAME			128	IAME	6	. CHANDE GO	_ •	_	
STREET ADDRESS						DOT M. FEBERAC HMY	#1	11.	
CITY-ST-ZIP				ITY-S1	710	S ANGERCAL ?	د کر ا	3304	
TITLE					1-ZIP 1 1		Change	Addition	
NAME			22N			L	_1 oe30		
			II		ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP				OTY-S	1-217		Change	☐ Addition	
~†tTLE		~ 🖸 Detr	 "		Ì	of Managerina is	_ onlinge	☐ vooiiiou	
NAME			N 3.2 N	AME	1				

3.3 STREET ADDRESS

3.4. CITY-ST-ZIP

4.4 CiTY-ST-ZIP

54 CITY-ST-ZIP

6.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

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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:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

Change

Change

☐ Change

Addition

☐ Addition

☐ Addition

CR2E034 (11/98)