

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

FILED  
Mar 10, 1999 8:00 am  
Secretary of State

03-10-1999 90180 027 \*\*\*150.00

DOCUMENT # P98000047079

1. Corporation Name

NEW MEDIA INTERACTIVA, INC.

Principal Place of Business

2232 NW 82ND AVENUE  
MIAMI FL 33122

Mailing Address

2232 NW 82ND AVENUE  
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/22/1998

4. FEI Number  
65-0839768

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 PO Box 3621

Suite, Apt. #, etc.

22

City & State

23 Coral Gables, FL

Zip

24 33114

Country

25 USA

2a. Mailing Address

26 PO Box 3621

Suite, Apt. #, etc.

27

City & State

28 Ccoral Gables, FL

Zip

29 33114

Country

30 USA

9. Name and Address of Current Registered Agent

POTASH, RICHARD J  
4800 N FEDERAL HIGHWAY  
SUITE 307B  
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

Potash, Richard J.

82 Street Address (P.O. Box Number is Not Acceptable)

190 NE 199th Street

83

Suite 204

84

City  
North Miami Beach

FL

85 Zip Code

33170

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 registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

3/1/99

DATE

Signature, typed or printed name of registered agent and title applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
JORDAN, EDWARD M  
STREET ADDRESS  
C/O 2232 NW 82ND AVE  
CITY-ST-ZIP  
MIAMI FL 33122

TITLE ☐ DELETE

NAME  
BASTO, CARLOS  
STREET ADDRESS  
C/O 2232 NW 82ND AVE  
CITY-ST-ZIP  
MIAMI FL 33122

TITLE ☐ DELETE

NAME  
URREGO, FABIO  
STREET ADDRESS  
C/O 2232 NW 82ND AVE  
CITY-ST-ZIP  
MIAMI FL 33122

TITLE ☐ DELETE

NAME  
SPATARO, LUIS F  
STREET ADDRESS  
C/O 2232 NW 82ND AVE  
CITY-ST-ZIP  
MIAMI FL 33122

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

12 NAME  
13 STREET ADDRESS  
PO Box 3621  
14 CITY-ST-ZIP  
Coral Gables, FL 33114

2.1 TITLE ☒ Change ☐ Addition

22 NAME  
23 STREET ADDRESS  
PO Box 3621  
2.4 CITY-ST-ZIP  
Coral Gables, FL 33114

3.1 TITLE ☒ Change ☐ Addition

32 NAME  
33 STREET ADDRESS  
PO Box 3621  
34 CITY-ST-ZIP  
Coral Gables, FL 33114

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME  
43 STREET ADDRESS  
PO Box 3621  
44 CITY-ST-ZIP  
Coral Gables, FL 33114

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
63 STREET ADDRESS  
64 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:

3/1/99

305-476-5770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0179054

CR2E034 (11/98)