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 # P98000095464

EXPRESS MEDIA U.S., INC.

Principal	Place of	Business
100 36TH	AVENUE	NORTH

ST. PETERSBURG FL 33704

Mailing Address

100 36TH AVENUE NORTH ST. PETERSBURG FL 33704

May 17, 1999 8:00 am Secretary of State

05-17-1999 90016 026 ***150.00



DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualified 11/12/1998		
2 Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Ar	plied For
	TH AVE N #133	26 204 37TH AV	7E N	#133	59-3542214	<u> </u>	t Applicable
Suite, Apt. #		Suite, Apt. #, etc.	11	<u> </u>		\$8.75	Additional
22	., -,-	27			5. Certifcate of Status Desired	Fee Re	quired
City & State	;	City & State			6. Election Campaign Financing	\$5.00	May Be
23 ST PE	ETERSBURG, FL	28 ST PETERSBU	JRG,	FL	Trust Fund Contribution	Added	o Fees
Zip	Country	Zip	Country		8. This corporation owes the current year Intan		
33704	25 PINELLAS	29 33704 3	O PIN	ELLAS_	Telsonar Topolty Tax.		X No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Ag	gent	
			81	Name			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			"	00017120			
			83				
			84	City		85 Zip	Code
			04	City	FL :	~p	5000
SIGNATURE	n familiar with, and accept the obligation				od when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	TROUSSOV, GREGORY		1.2 NAME				
STREET ADDRESS	204 37TH AVENUE NORTH #13	3	1.3 STREE	T ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33704		1.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE	TADDRESS			
CITY-ST-ZIP			2.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			34. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		+	Change	☐ Addition
NAME			4, 2 NAME	ĺ			
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE	}		Change	☐ Addition
NAME	•		6.2 NAME				
STOCET ADDRESS			6.3 STREE	TADDRESS			

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CR2E034 (11/98)