FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 03-10-1999 90183 045 ***150.00

FILED Mar 10, 1999 8:00 am

1999

DOCUMENT # P98000099466 1. Corporation Name 14 MEDIA, INC.

330 SW 27TH AVENUE

MIAMI FL 33135



Principal Place of Business Mailing Address 330 SW 27TH AVENUE SUITE 202 SUITE 202 DO NOT WRITE IN THIS SPACE MIAMI FL 33135 3. Date Incorporated or Qualifed <u>11/30/1998</u> Applied For 4 FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 28 23 Country Zip Zip Country 8. This corporation owes the current year Intangible 30 Personal Property Tax. 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent VIDAL-RODRIGUEZ, ANA Street Address (P.O. Box Number is Not Acceptable) 330 SW 27TH AVENUE SUITE 202 83 MIAMI FL 33135 84 85 Zip Code City 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			DA.	re	
40				DATE ES TO OFFICERS AND DIRECTORS IN 12	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER		
TITLE	D / SECRETARO DELETE	1.1 TITLE		Change	☐ Addition
NAME	VIDAL-RODRIGUEZ, ANA	1.2 NAME		, ,	
STREET ADDRESS	330 SW 27TH AVENUE #202	1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33135	1.4 C/TY-ST-ZiP			
TITLE	DEL RIO ANTONIO DELETE 33. S.W. 2) AVE #202	2.1 TITLE	(-2)/ (-2)	Change	Addition
NAME	CILADAVE #202	2.2 NAME			
STREET ADDRESS	33.0 2.00	2.3 STREET ADDRESS			_
CITY-ST-ZIP	MiAMI PL 33135	2.4 CITY-ST-ZIP			
TITLE	/ DELETE	3.1 TITLE	RORISE A.	☐ Change	☐ Addition
NAME		3.2 NAME	P. ORTHEZ	33° 5.	· m·
STREET ADDRESS	PO	3.3 STREET ADDRESS	000	MILANI	Ti/
CITY-ST-ZIP		3.4. CITY-ST-ZIP	27 AVE #2.2	// / /////	
TITLE	☐ DELETE	4.1 TITLE	33175	☐ Change	Addition
NAME		4.2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS	<u> </u>		
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS		•	
CITY-ST-ZIP		6.4 CITY-ST-ZIP			

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 feceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in attachment with an address, with all other like empowered

SIGNATURE: