

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S24042** (1)

1. Corporation Name

J & F BROADCASTING, INC.



Principal Place of Business

**8009 NW 36 STREET, SUITE 215
MIAMI FL 33166**

Mailing Address

**8045 NW 36TH ST
SUITE 507
MIAMI FL 33166
US**

3. Date incorporated or Qualified

01/10/1991

3a. Date of Last Report

03/21/1995

2. Principal Place of Business

2a. Mailing Address

21 **8045 NW 36TH STREET**

26

Suite, Apt. #, etc.

22 **SUITE # 507**

27

City & State

23 **MIAMI FLORIDA**

28

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

24 **33166**

25 **U.S.A.**

29

Zip

9. Name and Address of Current Registered Agent

**TERRAS, MARIA FERNANDA
10991 SW 72 TERRACE
MIAMI FL 33173**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **TERRAS, MARIA FERNANDA**
CITY-ST-ZIP **10991 SW 72 TERRACE
MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 amendment with an address.

SIGNATURE:

MARIA FERNANDA TERRAS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/96 (304) 471-7961
Date Date-time Phone #

CR2E034 (12/95)