FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 19 AM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S55557** **(0)**

1. Corporation Name
BONJOUR MEDIA, INC.

Principal Place of Business	Mailing Address
~~888 SE 3RD AVENUE~~ ~~SUITE 400~~ ~~FT. LAUDERDALE, FL 33316~~	~~888 SE 3RD AVENUE~~ ~~SUITE 400~~ ~~FT. LAUDERDALE FL 33316~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/29/1991
3a. Date of Last Report: 06/13/1994

2. Principal Place of Business
21: 6565 NOVA DRIVE
22: Suite, Apt. #, etc.
23: City & State: DAVIE FL
24: Zip: 33317
25: Country: USA

2a. Mailing Address
26: 6565 NOVA DRIVE
27: Suite, Apt. #, etc.
28: City & State: DAVIE FL
29: Zip: 33317
30: Country: USA

4. FEI Number: 65-0303348 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

~~BEHAR, LARRY J. P.A.~~
~~888 SE THIRD AVE~~
~~SUITE 400~~
~~FT. LAUDERDALE FL 33316~~

10. Name and Address of New Registered Agent

81 Name: DON FOSTER
82 Street Address (P.O. Box Number is Not Acceptable): 6565 NOVA DRIVE
83:
84 City: DAVIE **FL** 85 Zip Code: 33317

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: Don Foster 4/14/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~P~~	1.1 TITLE		☑ Change ☐ Addition
NAME	~~LALONDE, PIERRE~~	1.2 NAME		
STREET ADDRESS	~~2672 PALMER PLACE~~	1.3 STREET ADDRESS		
CITY-ST-ZIP	~~FT. LAUDERDALE FL~~	1.4 CITY-ST-ZIP		
TITLE	~~V~~	2.1 TITLE	P	☑ Change ☐ Addition
NAME	LAPOINTE, JEAN	2.2 NAME		
STREET ADDRESS	2666 PALMER PLACE	2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP		
TITLE	ST	3.1 TITLE		☐ Change ☐ Addition
NAME	MORIN, CECILE	3.2 NAME		
STREET ADDRESS	2666 PALMER PLACE	3.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE	V	☐ Change ☐ Addition
NAME		4.2 NAME	DON FOSTER	
STREET ADDRESS		4.3 STREET ADDRESS	6565 NOVA DRIVE	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	DAVIE FL 33317	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		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)(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.

SIGNATURE: Don Foster DON FOSTER 4/14/95 305-236-0003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0214429 CP