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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$58654

(2)

U.S. PRESS AND FUTURE INC.

FILED										
Aug 05 19	998 8:00am									
Secretar	y of State									

1.00 224.6023

Principal Place	e of Business	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Mailing Address					1	I OBBIGRIR ART BITAT (BITA BITAT BITIT BITIT B	181 BIBIN BN	JOS WYDEN DIWNS W	ten átén in	J U I
2 S BISCYANE BLVD STE 3400			2 S BISCYANE BKVD STE 3400											
MIAMI FL 331:	31			MIAMI FL 33131					<u> </u>	DO NOT WRIT	E IN THIS	3 SPACE		
US				US					3.	Date Incorporated or Qualified 06/11/1991				
2. Principal Pi	lace of Busin	oss	24	. Mailing Address					4.	FEI Number			Applied F	
21			26]						65-0277572			Not Appli	
Suite, Apt	#, etc.			Suite, Apt. #, etc.					-	Certificate of Status Desired			Addition	
22			27						3,	Commodite of Citatos Desired			Required	
City & State	D			City & State					6.	Election Campaign Financing Trust Fund Contribution			May B	
Zip		Country	28]	T Co	untry	,			This corporation owes or has p			d to Fees	-
24	1	25	29	1	30	,			B.	Personal Property Tax due Jun			No.	,
		and Address of Cu							10.	Name and Address of New R	egisterec	J Agent		
		CORPORATE SE		NC		81	1	Name						
		OWER STE 3400				82	- 5	Street Addre	ss (F	P.O. Box Number is Not Accepta	ible)	·-,		
	BISCYAEN					83	-							
MLA	VMI FL 3313	п				63					_			
						84	(City			FI	85 Zip	p Code	
11. Pursuant t	to the provise	ons of Sections 607	.0502 and	697.1508, Florida Stat	tutes, the a	ibove	e-r	named corpo	ratio	n submits this statement for the	purpose	of changing	its regist	tered
office or re agent I ar	egi ste red agi m f am iliar wit	arit, or both, in the S h, and accept the o	state of Ho Ibligations	rida. Such change wa of, Section 607.0505,	s authorize Florida Ste	ea by stutes	/ 11 S.	ne corporatio	on's E	poard of directors. I hereby acce	pt the ap	po intment a	as registe	rea
SIGNATURE				- 40										
12,	Signature, typed o	or printed mane of registere OFFICERS			KOTE : Hegisten		ent :	signature required		reinstatrig) ADDITIONS/CHANGES TO OFFI	DATE CERS AN	ID DIRECTO	DDS IN 11	
TITLE	DPST		71112 121130	DELETE	1.1.1			T T	<u>-</u>	ADDITIONS/CHANGES TO OTT	OLNS AI	Change		ddition
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CITY-ST-ZIP	MIAMI FL	<u> </u>				HTY-S	1-2	ZIP			_			
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STREET ADDRESS CITY-ST-ZIP						SITY-S								
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TITLE				L DELETE	6.1 T							☐ Change	: LJ A	ddition
NAME						MAME		100						
STREET ADDRESS								ODRESS						
CITY-ST-ZIP	ertify that the	information supplic	ed with this	filing does not qualify	of or the ex	emp	tio	n stated in S	ectio	on 119.07(3)(i), Florida Statutes.	I further (certify that th	ne inform	alion
officer or o	dir ect or of the	al report or suppleme e corporation or the changed, of on an	receiver o	r trusleg: empower ed t	scurate ar lo execute	nd tha this	at rep	my sigriature port as requi	e sha red t	ill have the same legal effect as by Chapter 607, Florida Statutes	if made u ; and that	inder oath; t I m y name a	that I am i ippears in	an n