PROFIT CORPORATION ANNUAL REPORT 1999

PUBLISHER INQUIRY SERVICES, INC.

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

May 08, 1999 8:00 am Secretary of State **Katherine Harris**

05-08-1999 90064 034 ***150.00



|--|

Principal Place of Business Mailing Address					1,441,41		
951 BROKEN SOUND PKWY NW 951 BROKEN SOUND PKWY NW			NW				
BOX 3008 BOX 3008				DO MOT WEITE 11 THE REACE			
BOCA RATON FL 33431 BOCA RATON FL 33431					DO NOT WRITE IN THIS SPACE		
					 Date Incorporated or Qualifed 09/30/1991 		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For
21 26					65-0287986		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5 Certificate of Status Desired	\$8.7	5 Additional
22					5. Certificate of Status Desired	Fee	Required
City & State City & State					6. Election Campaign Financing	\$5.0	0 May Be
23	_ `				Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year In	ntangible	
24	25	29 3	0		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	l Agent	
			81	Name			
	TCH, DAVID		82	Stroot	Address (P.O. Box Number is Not Acceptable)		
951	Broken Sound PKWY NW		62	Sueer	Address (F.O. Box Number is Not Acceptable)		
STE	190		83				
BOC	A RATON FL 33431						
			84	City	F	 85 Z	ip Code
		O COT 1500 Florido Ctotuto	the above	nomod			its registered
11. Pursuant office or r	egistered agent, or both, in the State	of Florida. Such change was aut	horized by	the corpo	corporation submits this statement for the purpose coration's board of directors. I hereby accept the app	pintment as	registered
agent, i a	m familiar with, and accept the obliga	tions of, Section 607.0505, Florid	la Statutes	•			i
SIGNATURE					equired when reinstating) DATE		\
	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: K	13.	nt signature r	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
12.	OPPICERS AIN	DELETE	1.1 TITLE		ABBITIONS/CHANGES TO OFFICE ROS	Chang	
TITLE	SAVITCH, DAVID		1.2 NAME				
NAME	951 BROKEN SOUND PKWY N	na/					
STREET ADDRESS	T .	144	1.3 STREET				
CITY-ST-ZIP	BOCA RATON FL	[** per eve	1.4 CITY-S	T-ZIP		Chang	ie
TITLE	DVP					□ C∩an	ie Magnoni
NAMÉ	SAVITCH, JANINE M		2.2 NAME				1
STREET ADDRESS	951 Broken Sound PKWY N	IW .	2.3 STREE	ADDRESS			,
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-S	T-ZIP		-30	
TITLE			3.1 TITLE		Director (only)	[₹ Chang	ge 🗌 Addition
NAME	STEPHENS, THOMAS E		3.2 NAME		Stephens, Thomas E.		
STREET ADDRESS	951 Broken Sound PKWY N	(W	3.3 STREE	ADDRESS	951 Broken Sound Pkwy NW		
CITY-ST-ZIP	BOCA RATON FL		3 4. CITY-S	T-ZIP	Boca Raton, FL 33431		
TITLE	ST DELETE 4.11		4.1 TITLE		Director/Secretary/Treasur	e <u>xfX</u> t Chang	ge 🗌 Addition
NAME	ROSS, VERNON C		4. 2 NAME		Ross, Vernon C.		
I			4.3 STREET	TADDRESS	951 Broken Sound Pkwy NW		
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-S		Boca Raton, FL 33431		
TITLE		☐ DELETE	5.1 TITLE		Vice President	Chan-	ge X Addition
NAME		_	5.2 NAME		Buckwald, Edward		
STREET ADDRESS			5.3 STREET	ADDRESS	951 Broken Sound Pkwy NW		
1			5.4 CITY-S		Boca Raton, FL 33431		
CITY-ST-ZIP	<u> </u>		6.1 TITLE		DOCA RACOII, FII JUANI	☐ Chan	ge Addition
TITLE			0.1 IIILE				

CITY-ST-ZIP 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 emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

A PART IING OFFICER OR DIRECTOR

4/30/99

Date

561/998-7929

Daytime Phone #

= 34