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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCU 1. Corporation	MENT # V407	01 (7)			
1	EO MASTER MULTIMEDIA,	INC.			
Principal Plac	ce of Businoss	Mailing Address			
2700 NW MIAMI FL US	72ND AVE . 33122	2700 NW 72ND AVE Miami FL 33122 US			
2 Principal C	Place of Business			3. Date Incorporated or Qualified 05/29/1992	3a. Date of Last Report 09/25/1995
2. Phricipare 21	1ace of Business	2a. Mailing Address 26		4. FEI Number	Applied For
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		65-0337683	Not Applicable
22 City & Stat	la control de	27		5. Certificate of Status Desired	[] \$8.75 Additional Fee Required
23		City & State		Election Campaign Financing Trust Fund Contribution	□ \$5.00 May Be
Zip 24	Country	Zip	Country	This corporation has liability for it	Added to Fees
[24]	25 9. Name and Address of Curre	29	30	Florida Statutes Yes	□No
		III Negistered Agent	81 Name	10. Name and Address of New R	egistered Agent
	1, JOSE A.		i i	Address (B.O. Boy N. poka i N. A	
2700 NW 72ND AVE MIAMI FL 33122				The state of the s	
MICANI	1 FL 33122		83		
			84 City		85 Zip Code
 Pursuant for register 	to the provisions of Sections 607,0502 red agent, or both, in the State of Flori	and 607,1508, Florida Statute	s, the above named co	orporation submits this statement for the purp board of directors. I hereby accept the appo	Dose of changing its registered office
	th, and accept the obligations of Secl	ion 607.0505, Florida Statutes.	u by the corporation's	board of directors. I hereby accept the appo	intment as registered agent. I am
SIGNATURE	Signature, typica or printed name, of registered agent	and title if applicable (NOT)	. Registered Agent signatura re		
14.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12
TITLE NAME	VP Marti, Elida T.	☐ DELETE	1. 1 TITLE		☐ Change ☐ Addition
STREET ADDRESS	2700 NW 72ND AVE		1.2 NAME		
CITY-ST-ZIP	MIAMI FL		1.3 STREET ADDRESS		Ji
TITLE	P	[] DELETE	1.4 C(TY - ST - ZIP 2 1 TITLE		
NAME {	MARTI, JOSE A.		2 2 NAME		Change Addition
	ATOM NIM TOND AVE		2.3 STREET ADDRESS		-40000000000000000000000000000000000000
CITY-ST-ZIP	MIAMI FL VP		2.4 CITY-ST-ZIF		
NAME	STACKHOUSE, JOHN	DELETE	3 1 TITLE		Change Addition
STREET ADDRESS	2700 NW 72ND AVE		3.2 NAME		
CITY-ST-ZIP	MIAMI FL		3.3 STREET ADDRESS		
TITLE		DELETÉ	3.4 CITY - ST - ZIP		
NAME		_	4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY- ST- ZIP]
TITLE		☐ DEFELE	5 1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE		DELĒTE	5.4 CHTY-ST-ZIP		
NAME		LJ DEKETE	6. 1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP					
 I do hereby certify that t 	certify that the information supplied with the information indicated on this annual	th this filing is voluntarily furnish	ed and does not qualif	y for the exemption stated in Section 119.07	(3)(k), Florida Statutes, I further

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. I further 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 SIGNATURE: