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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V40848

(6)

MEDIA WAREHOUSE, INC.

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Principal Place of Business			Ma	Mailing Address						EIRH DINE BIN	J BURNI KEKE		
P.O. BOX 811689 BOCA RATON FL 33487-1689				P.O. BOX 811689 BOCA RATON FL 33481-1689									
			nees nen oe						 Date Incorporated or Qualified 06/03/1992 	3a. Date 07/09	of Last R /1996	leport	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			pplied For	
21				26					65-0400241		 	ot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				1	5. Certificate of Status Desired			Additional	
City & State				City & State							Fee Re	<u> </u>	
23				├ ┐ '					Election Campaign Financing Trust Fund Contribution		\$5.00		
Zip Country			28	Zip Country							Added		
24	25			30					8. This corporation has liability for in Florida Statutes	ntangibie ta)] Yes [[2]		. 199.032,	
9, Name and Address of Currer			29 ent Regist				10. Name and Address of New Regi						
CAL	RTA, RICH	***************************************		······································		81	Name						
						82							
6401 E ROGERS CIR Ste 9							Street	t Addres	ess (P.O. Box Number is Not Acceptable)				
	CA RATON	I EL 22497				83		·· ····					
ВО	UK IKIUN	I FL 00401		4									
						84	City			FL	B5 Zip∜	Code	
11. Pursuant	to the provis	sions of Sections 607.05	02 and 60	07.1508, Florida Statu	ites, the a	bove	e-riamec	d corpora	ation submits this statement for the prise board of directors. I hereby accept		L, ianging if	ls registered	
office or r	registered a	gent, or both, in the Stat ith, and accept the obli	e of Floric	ta. Such change was	authorize	ed by	the cor	orporation	is board of directors. I hereby accep	of the appoin	tmont as	registered	
•	2111 (Q211111)Q27 W	nia, and accept the oblig	ganoris or	, 360(1011-007),0303,1	iona or	noie.	٥.						
SIGNATURE	Signature, type	d or printed name of registered as	gent and title	if applicable (NO	nt: Regisler	ed Age	mi signatur	ire required s	when reinstating)	DATE			
12.	OFFICERS AN			D DIRECTORS 13					ADDITIONS/CHANGES TO OFFIC	ERS AND D	RECTOR	RS IN 12	
TITLE	PD			☐ DELETE		1.0 TOTALE] Change	Addition	
NAME		RICHARD R			1.21	IAME							
STREET ADDRESS 6401 E ROGERS CIR STE 9			1			1.3 STHEET ADDRESS		3					
CITY-ST-ZIP	BOCA F	ATON FL			141	CITY - S	I-7P			<u>.</u>			
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NAME					221	IAME		RS	SIMMS	_			
STREET ADDRESS	İ				235	STREET	ADDRESS	12	or george Broh	Bra3	>		
CITY-ST-ZIP					2 4	CITY-S	51 - 71P	DE	DRAY BEACH, FL	- 334	<u>د ه</u>		
TITLE	}			☐ DELETE	311	HLE			•	_] Change	Addition	
NAME					321	NAME							
STREET ADDRESS	•				333	STREET	ADDRESS	3					
CITY-ST-ZIP							ST - ZIP						
TITLE				☐ DELÉTE		IIIL				<u>L</u>] Change	☐ Addition	
NAME	•					NAME							
STREET ADDRESS .							ADDRESS	5					
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TITLE				□□ DETEIE	511	HILL				ا	Change	Addition	
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BYACTY ABBRES						ŧAME	LODGEGG						
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CITY-ST-ZIP TITLE				DELETE	5.3 ! 54 (AAME STREET CITY-S UTLE		3] Change	Addition	
CITY-ST-ZIP				☐ DELETE	5.3 (54 (61) 62 (KAME STREET CITY-S UTLE KAME					Change	Addition	

14. I do 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an attachment with an address.