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

DOCUMENT #

V49985

(7)

BABY BROADCASTING, INC.

Principa' Place o	of Business		iling Address					
438 86TH AVE UNIT ONE		S	38 B6TH AVE T. PETERSBURG BEA S	CH FL 3370)6			
ST PETERSBURG BEACH FL 33706 US US							3. Date Incorporated or Qualified 3a. Date of Last Report 07/07/1992 02/28/1995	
2. Frincipa' Plac	ce of Business	h 1	2a. Maiing Address				4. FEI Number Applied For	\Box
21		26	D % 1 11t-				59-3133505 Not Applicable	4
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5, Certificate of Status Desired S8.75 Additional Fee Required	
City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	p Country		Z _i p Cour		ntry	,	8. This corporation has liability for intangible tax under s 199.032,	
24 25 25 25 9, Name and Address of Current Res			and Agent	[30]			Florida Statutes Yes No 10. Name and Address of New Registered Agent	
	9. Name and Address of Curr	eni negisi	ered Agent		81	Name	IU. Hallie and Address of Hall Hogestored Agent	_
WARDEN	, LINDA				B 2	Street Add	Idress (P.O. Box Number is Not Acceptable)	_
438 86TH	I AVE RSBURG BEACH FL 33706				83			_
SI. FEIE	NODURO DENOTTE SOLO				04		85 Zip Code	_
					84	'	FL	
or registere familiar witi SIGNATHEE	id agent, or both, in the State of Flo i, and accept the obligations of, Se	orida. Such ection 607.0	change was authoriz 0505, Florida Statutes	red by the c	xorp	oration's bo	oration submits this statement for the purpose of changing its registered offic pard of directors. I hereby accept the appointment as registered agent. I am	
	Styliature, typed or printed name of registered as OFFICERS A)TE Rugistered 13.	Ager	nt signature requir	ared when reinslating: DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	P	UNE DINE C	DELETE	1.11	ITLE		Change Addition	_
NAME	WARDEN, LINDA		_	1.2 N/	AME			
STREET ADDRESS	438 86TH AVE			1.3 \$1	REET	T ADDRESS		
CHY+S1+ZIE	ST PETERSBURG BEACH I	<u> </u>				S1 - ZIP		
THLE	T		☐ DEFEIF	2 1 7			Change Addition	
NAME	Kahle, Debra 438 86th Ave			22 N/		r 10000000		
STREET ADDRESS	ST PETERSBURG BEACH F	3				FADDRESS ST-ZIP		
CITY ST-7IP	OT I ETCHODONO DENOTT		DELETE	3 1 1			☐ Change ☐ Addition	_
NAME				3 2 N	AME			
STREET ADDRESS				33 S	TREE	T ADDRESS		
CHY-ST ZIP						ST-ZIP	Charge C Addition	_
TITLE			DELETE	4.17			Change Addition	
NAME				42 N			,	
STREET ADDRESS						T ADDRESS ST-ZIP		
1/11/F			DELETE	5 1 1	_		☐ Change ☐ Addition	
NAME				5.2 N	AME			
STREET ADDRESS				538	TREF	T ADDRESS		
CHY-S1-7#						ST-ZIP		_
THE			☐ DELETE	6 1 T			· Change Addition	
NAM:				62 N				
STREET ADDRESS						T ADDRESS		
C-TY - ST - Z-P	a part is that the information or see in	ad with this	filing is valuntarily for	640	(TY	ST-ZIP	fy for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further	_
14, Ido nereb	y coruly mai me information suppli	par with trills	ming is voluntarily ful	i iigi iya alifu		oo nos quality	ig to the exemption stated in deciding the same least affect as it made under	

14. I do hereby certify that the information supplied with this filing is voluntarily numbered and boes not quality for the exemption state of the same legal effect as if made under 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 certify 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 War DE PORTER WHE OF SIGNAR PRESERVE

2/28/95 813 360 96 14

3R2F034 (12/9)