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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 CLIMENT # 1/796

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Apr 30 1997 8:00am
Secretary of State

AXIOM CIRCULATION, INC.  Trincipal Place of Business DIO ST. LUCIE BLVD. T. PIERCE FL 34946  T. PIERCE FL 34946  T. PIERCE FL 34946  T. PIERCE FL 34946					<del></del>					
							3. Date Incorporated or Qualified 10/21/1992	3a. Date of Las 05/01/1996		
Principal	Place of Busi	iness.	<u> </u>	28. Mailing Address  26. Suite, Apt. #, etc.  27.			4. FEI Number 65-0367070		Applied For	
Sute, An	ıt #. etc	4.4						- \$8.7	Not Applicable  \$8.75 Additional	
			<u> </u>				5. Certificate of Status Desired	Fee Required		
City & St	ale		City & Stat	е			Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees	
Ζιρ		Country	Zip		Country	у	8. This corporation has liability fo		rs. 199.032,	
	O Nome	25	29 urrent Registered Agen		30		Florida Statutes  10. Name and Address of New R	Yes No		
RH	IOAT, RAYM		nitetit Vefterere Wheli		81	Name	TO, Maine and Address of New F	iogistorou Agoin	······································	
	10 ST. LUCI				82	Carrott Aur	dress (P.O. Box Number is Not Accepta	-hla		
	PIERCE FL				04	Street Add	aress (P.O. Box Number is Not Accepta	able)		
					63					
					84	City		- 85 Z	ip Code	
Pursuar office o	il to the provi	s ons of Sections 607 igent, or both, in the S	7.0502 and 607.1508, Flo State of Florida, Such ch	orida Statut lange was i	tes, the abov authorized b	re-named cor by the corpora	rporation submits this statement for the ation's board of directors. I hereby acc	purpose of changinept the appointment	g its registered as registered	
agent 1	l arn famuliär v	with, and accept the c	7.0502 and 607.1508, Flo State of Florida. Such ch obligations of, Section 60 ed agent and title if applicable. S AND DIRECTORS	37.0505, Fli	orida Statute	rs.	rporation submits this statement for the ation's board of directors. I hereby accurate the statement of the control of the con	purpose of changin ept the appointment DATE		
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Too increase carry that the information supplied with this image does not quality for the exemption stated in section (19.07/37/9, Fortica statutes, Information information increated 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 eath; 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:

RAYMOND A. RHOAT 4/24/97 (56)444-5447