

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

**APPROVED
AND
FILED**

STATE OF FLORIDA
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Janita B. Matham
Secretary of State
Tallahassee, Florida 32399-0001

MAY - 1 1995

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P21764** (6)

FUJITSU BUSINESS COMMUNICATION SYSTEMS, INC.

Principal Office: 3190 MIRA LOMA AVE ANAHEIM CA 92806
 Mailing Address: 3190 MIRA LOMA AVE ANAHEIM CA 92806

DO NOT WRITE IN THIS SPACE

3. Date incorporated or organized 11/15/1988	3a. Date of Last Report 02/09/1994
4. FEI Number 95-3004475	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for who's right fee under 22-1002 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Office (City, State)	2a. Mailing Address (City, State)
21. State Agency	26. State Agency
22. City & State	27. City & State
23. City & State	28. City & State
24. City & State	29. City & State
25. City & State	30. City & State

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	10. Name and Address of New Registered Agent
	B1. Name
	B2. Street Address (P.O. Box Number is Not Acceptable)
	B3. City
	B4. City
	FL B5. Zip Code

11. Pursuant to the provisions of Sections 607.01, 607.02 and 607.03, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Sections 607.01, 607.02, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TYPE: P	NAME: CAROLLO, ANTHONY V JR 6660 E SAN MIGUEL PARADISE VALLEY AZ	1. TYPE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TYPE: V	NAME: SAWADA, SUMIO 59 EAGLE RUN DR IRVINE CA	2. TYPE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TYPE: VT	NAME: TRACY, RICHARD 2108 CRESTVIEW DRIVE LAGUNA BEACH CA	3. TYPE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TYPE: VS	NAME: DEFOREST, THOMAS 1712 CLARIDGE STREET ARCADIA CA	4. TYPE: <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	VS KENNETH D. SHIRLEY 20214 BARNARD AVE WALNUT, CA 91789
TYPE: V	NAME: BOYLE, MICHAEL 6546 DEER LN PALOS HGTS IL	5. TYPE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TYPE: V	NAME: CALLAHAN, RAYMOND W 22612 DEMASIA MISSION VIEJO CA	6. TYPE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. Further, I 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 this corporation or the receiver or liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 13 if changes, on an affidavit with an address.

SIGNATURE: *RM Tracy* Richard M. Tracy 5/1/95 714-630-7721
 SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR