


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

FILED
May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 639742 (6)
 1. Corporation Name
AIRCOM COMMUNICATIONS, INC.



Principal Place of Business 2178 10TH STREET SARASOTA FL 34237-3412	Mailing Address 2178 10TH STREET SARASOTA FL 34237-3412
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3. Date Incorporated or Qualified 10/15/1979	3a. Date of Last Report 05/01/1996
4. FEI Number 59-1961577	Applied For <input type="checkbox"/> Applied For <input checked="" 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 intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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9. Name and Address of Current Registered Agent GOFF, LUTHER A. 2178 10TH ST. SARASOTA FL 34237	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE N/A (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE S	NAME GOFF, AMBROSIA M	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 847 HUDSON AVE	CITY-ST-ZIP SARASOTA, FL 00000	1.2 NAME	
TITLE DV	NAME GOFF, KENNETH C	1.3 STREET ADDRESS	
STREET ADDRESS 847 HUDSON AVE	CITY-ST-ZIP SARASOTA, FL 00000	1.4 CITY-ST-ZIP	
TITLE PTD	NAME GOFF, LUTHER A	2.1 TITLE DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 847 HUDSON AVE	CITY-ST-ZIP SARASOTA, FL 00000	2.2 NAME GOFF, KENNETH C.	
TITLE D	NAME GOFF, SHAUNE E.	2.3 STREET ADDRESS 2438 ICECAPADE DR.	
STREET ADDRESS 847 HUDSON AVENUE	CITY-ST-ZIP SARASOTA FL	2.4 CITY-ST-ZIP SARASOTA, FL 34240	
TITLE DV	NAME GOFF, JAMES E.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 847 HUDSON AVE	CITY-ST-ZIP SARASOTA FL	3.2 NAME	
TITLE	NAME	3.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	4.2 NAME	
TITLE	NAME	4.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	5.2 NAME GOFF, JAMES E.	
TITLE	NAME	5.3 STREET ADDRESS 2191 HYDE PARK ST.	
STREET ADDRESS	CITY-ST-ZIP	5.4 CITY-ST-ZIP SARASOTA, FL 34239	
TITLE	NAME	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	6.2 NAME	
TITLE	NAME	6.3 STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	6.4 CITY-ST-ZIP	

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 13, if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: **4-28-97** (941) 955-7106

CR2E034 (9/96)