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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # 646869

(8)

ADVANCED RADIO COMMUNICATION SERVICES OF FLORIDA , INC.

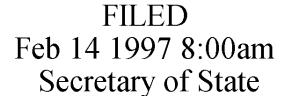
1700 S. DIXIE HWY. BOCA RATON FL 33432 US

Principal Place of Business

Mailing Address

PO BOX 10

**BOCA RATON FL 33429-0010** 





••				3. Date Incorporated or Qualified 12/03/1979	3a. Date of Last Report 02/08/1996
2. Principal Place of Business	2a. Mailing Addres	S	<del>'</del>	4. FEI Number	Applied For
21	26			59-1959422	Not Applicable
Suite, Apt. #, etc.	Suite Apt. #, et	te.			\$8.75 Additional
Ch. P. State	27 City P. State				Fee Required
City & State	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Cou	ntry	B. This corporation has liability for in	tangible tax under s. 199.032.
24 25	25 29 30			Florida Statutes X Yes No	
9, Name and Address	s of Current Registered Agent			<ol><li>Name and Address of New Reg</li></ol>	Istered Agent
GERRARD, WILLIAM T			81 Name		
1700 SO DIXIE HIGHWAY BOCA RATON FL 33432			82 Street Address (P.O. Box Number is Not Acceptable)		
			24 0		Table 19 Aug.
			64 City		FL 85 Zip Code
office or registered agent, or both, is agent. I am familiar with, and acceptions SIGNATURE	in the State of Florida. Such change	e was authorized 05, Florida Stat	I by the corp utes.	corporation submits this statement for the pu oration's board of directors. I hereby accept required when reinstating)	rpose of changing its registered the appointment as registered
	ICERS AND DIRECTORS	13.	- gork eightee	ADDITIONS/CHANGES TO OFFICE	
TITLE PD	DELE		LE	1,00,110,10,0,1,110,10,10,10,10,10,10	K Change ☐ Addition
NAME GERRARD, WILLIAM	<del>-</del>	1.2 NA		Gerrard, William T.	
ATAMAL ACCIAL CLICA				1700 S. Dixie Hwy Ste	- E
BOOK BATON FI			REET ADDRESS	1700 S. DIXIE MWY STE	8 5
CITY-ST-ZIP BLIGA HATON FE	DELE		Y-ST-ZIP	Boca Raton, FL	Change Addition
	bett	l l			change Addition
NAME		2.2 NA			
STREET ADDRESS			REET ADORESS		
CITY-ST-ZIP	DELE	····	TY-ST-ZIP		Change
TITLE	L.J DELE				L] Change L] Addition
NAME		3.2 NA			
STREET ADDRESS		3.3 ST	REET ADDRESS		
CITY-ST-ZIP			TY-ST-ZIP		
TITLE	☐ DELE	TE 4.1 TIT	LE		Change Addition
NAME		4.2 N	AME		
STREET ADDRESS		4.3 \$1	REET ADDRESS		
CITY-S1-ZIP			Y-ST-ZIP		
TITLE	DELE.	TE 5.1 TIT	Œ		☐ Change ☐ Addition
NAME		5.2 NA	ME		
STREET ADDRESS		5.3 \$1	REET ADDRESS		
CITY - ST - ZIP			Y-ST-ZIP		
TITLE	☐ DELE				☐ Change ☐ Addition
NAME		6.2 NA	ME		
STREET ADDRESS			REET ADDRESS		
Crty-ST-ZiP					
SILL DISERT I			TY-ST-ZIP		

Lam an officer or director of the appears in Block 12 or Block empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

**SIGNATURE:**