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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

FILED Jan 23 1998 8:00am Secretary of State

DOCUMENT # 646869 (8) ADVANCED RADIO COMMUNICATION SERVICES OF FLORIDA , INC.												
Principal Place of Business Mailing Address							····		I 10011# DUBLE OLDIA BILDE FOLIF DITER FO		83811 B1811 818	
1700 S. DIXIE HWY.					PO BOX 10)				
BOCA RATON FL 33432					BOCA RATON FL 33429-0010				DO NOT INDITE	INITALIO (PDACE	
US				US	05				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
								\ '	12/03/1979			1
2, 1	2. Principal Place of Business				2a. Mailing Address				4. FEI Number		I IA	pplied For
21				26	26				59-1959422		N	ot Applicable
9	Suite, Apt.	.pt. #, et c.			Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22	22	. 9. Ctoto			27 Ch. * Clat-							equired
	ity & State			<u> </u>	City & State				6. Election Campaign Financing	П		May Be
23	Zip	Country			Zip Count		itry		Trust Fund Contribution 8. This corporation owes or has pa			to Fees
24		j	25	29		30	,		Personal Property Tax due June	_		itangibie □ No
<u> </u>			and Address of Cur		d Agent			10	0. Name and Address of New Re		Agent	
	GE	RRARD, WII	LLIAM T				Namo	1				
1700 SO DIXIE HIGHWAY) ,	32 Street	Address	(P.O. Box Number is Not Acceptab	ole)		
BOCA RATON FL 33432						-			·	·		
						[33					
							34 City			FI	85 Zip	Code
III Dura well to the provisions of Postions COZ 0E02 and COZ 1500 Florida Ctabutes							aus pamad	doornood	tion authorite this statement for the n	FL	shanging i	ito rogistored
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida. 							by the cor	rporation's	s board of directors. I hereby accep	ot the app	ointment as	registered
	•	rn ramiliar wii	n, an o a ccept the ob	irgations of, Sec	Ction 607.0505, F	tes.						
SIGNATURE Signature, typod or printed hanno of registered agent and tale if applicable (NOTE: Rogiste								e required wh	nen (einstating)	DATE	· · · · · · · · · · · · · · · · · · ·	j
12.		**	OFFICERS A	AND DIRECTOR		13.		-1	ADDITIONS/CHANGES TO OFFICE	ERS AND		
TITLE		PD	o Mariana T		DELETE	11111					Change	[_] Addition
NAME		GERRARD, WILLIA 1700 S DIXIE HWY		.			1.2 NAME					ļ
	BOOA DAT						EE1 ADDRESS					
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	ET ADDRESS						EET ADDRESS					
	ST-ZIP						Y-ST-ZIP	}				
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TITLE					DELETE	6.1 TITL	E				Change	Addition
NAME	1					6.2 NAN	te l					
STREE	T ADDRESS					6.3 STR	E1 ADDRESS					
CITY-	ST-ZIP					6.4 CITY	- \$1 - 2IP	1				

14. I hereby certify that the information supplied with this hing 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 leport 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 corpo aron or the receiver of tristee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 or on an anathment with an address.

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