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

PROFIT . CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F59525

E.N.G. COMMUNICATION SERVICE, INC.

Principal Place	e of Business	Mailing Address						
		7700 S W 146 RD MIAMI FL 33183						
					DO NOT WRITE	IN THIS SPA	CE	
					3. Date Incorporated or Qualifed			
		•			12/23/1981			
Principal Place of Business 2a. Mailing Address					4. FEI Number		Ap	plied For
21	•	26			59-2154871		No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #,			etc.		- C-tift (Ct-t D-tid	\$1	3.75 A	dditional
22		7		5. Certifcate of Status Desired	□ * `	Fee Re	quired	
City & Stat	e	City & State	City & State		6. Election Campaign Financing	\$	5.00	May Be
23 28					Trust Fund Contribution		Added to	
Zip Country Zip			Country		8. This corporation owes the curren	t vear Intendit	le	
24 . 25 29 3			-, ·	Personal Property Tax.			□No	
24	9. Name and Address of Current		<u>'</u>		10. Name and Address of New Reg			
	g. Name and Address of Current	Registered Agent	81	Name	10: 110:110	,		
RUS	SELL, SANDRA LYNN			''				
7700 S W 146 RD			82	Street Add	dress (P.O. Box Number is Not Acceptable	e)		
MIAMI FL 33183			<u> </u>			, , ,		2.5
MUAN	MI FL 33 163		83					
			84	City		85	Zip C	ode
	•		**	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		FL °°		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re-	gistered Ager	nt signature requir	red when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DI	RECTO	RS IN 12
TITLE	ST	☐ DELETE	1.1 TITLE		1 ₆ - 4 - 487 - 4		Change	☐ Addition
NAME	RUSSELL, SANDRA LYNN		1.2 NAME					
STREET ADDRESS	7700 S W 146 RD		1.3 STREET	TADORESS				
CITY-ST-ZIP	MIAMI, FL 00000		1.4 CITY-S	į.				1
TITLE	PD	☐ DELETE	2.1 TITLE	1-21			Change	Addition
	RUSSELL JR. PAUL JAMES	_ 5	2.2 NAME	l		_	·	_
NAME	,							
STREET ADDRESS	7700 S W 146 RD		2.3 STREET	[
CITY-ST-ZIP	MIAMI, FL 00000		2.4 CITY-S	ST-ZIP			Change	Addition
TITLE 1982		☐ DELETE	3.1 TITLE		•	i.i.	Change	Addition
NAME	A NO.		3.2 NAME					
STREET ADDRESS			3.3 STREET	TADDRESS				* 1 M
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	; <u>'</u>			
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME	2.		4. 2 NAME					
STREET ADDRESS			4.3 STREET	TADORESS				
CITY-ST-ZIP	1		4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME		•			
STREET ADDRESS			5.3 STREET	TADDRESS				
	-51	į	5.4 CITY- S	J	•			
CITY+ST+ZIP TITLE	海海家 1.7 以	☐ DELETE	6.1 TITLE	-			Change	Addition
÷ .	7766		6.2 NAME	j				
NAME	E Salt / sk		U.Z IWWIE	ł				

CITY-ST-ZIP 14. I 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, with all other like empowered.

3.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

FILED

Jan 21, 1999 8:00am

Secretary of State

01-21-1999 90072 030 ***150.00