FILE NOW: FILING FEE AFTER MAY 1 IS \$550 DO

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT STATE

Sandra B. Mortium

Secretary of State
DIVISION OF CORPORTIONS

DOCUMENT # F9300005633 (3)

PINNACLE SIX COMMUNICATIONS, INC.

FILED Feb 21 1997 8:00am Secretary of State



rancipa riac	a o: Dusiness	Mailing Address				,		
SUITE 4-B 2901 S. BAYSHORE DRIVE COCONUT GROVE FL 33133		SUITE 4-B 2801 S. BAYSHORE DRIVE COCONUT GROVE FL 33133-6018				•		
					3. Date Incorporated or Qualified 12/13/1993	3a, Date of L 02/19/19		
	lace of Business	28. Mailing Address	3		4. FEI Number	L	Applied For	
		26	······································		13-3699489		Not Applicable	
Suite, Apt. #, etc 22		Suite, Apt. #, etc	27		5. Certificate of Status Desired	1 1 ***	75 Additional se Required	
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees	
Zιp	Country	Zip	Cou	untry	This corporation has liability for			
24	25	29	30		Florida Statutes	Yes No		
	g. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Agent		
	IDY, RICHARD	_		81 Name			ĺ	
2901 S. BAYSHORE DR. APT. 4-B COCONUT GROVE FL 33133				82 Street Addi	dress (P.O. Box Number is Not Acceptable)			
				83				
				84 City		85	Zip Code	
						FL		
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Fiorida	Statutes, the a	bove-named corp	poration submits this statement for the p	ourpose of chang	ing its registered	
agent. I	m familial with, and accept the ob	ligations of, Section 607.050	05. Florida Sta	tutes.	poration submits this statement for the ption's board of directors. I hereby acce	or the appointme	it as inflictored	
SIGNATURE	1/1/MOUD L	aucly			21181	97		
	Spriature, typed or printed name of registered	<u> 1''</u>		d Agent signature requi		DATE		
12. TITLE	PCTD OFFICERS /	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
	LANDY, RICHARD	☐ DCLC		1		L Ch	ange Addition	
NAME	2901 S. BAYSHORE DRIVE	ADT A.R	1.2 N					
STREET ADDRESS	COCONUT GROVE FL 3313			TREET ADDRESS				
CITY-ST-ZIP TITLE	SD SD	DELE1		ITY-ST-ZIP		☐ Ch	ange Addition	
NAME	DUNAY, ED W	beec					arige (Addition	
STREET ADDRESS	300 EAST 57TH STREET		2.2 N	TREET ADDRESS		, e		
CITY-ST-ZIP	NEW YORK NY 10022				•			
TITLE	TEN TOTAL TOTAL	DELET		CITY - ST - ZIP		L] Ch	ange Addition	
NAME		Land Market	3.2 N	i			ango receion	
STREET ADDRESS	•	·		TREET ADORESS				
CITY-ST-ZIP				CITY-ST-ZIP				
TITLE		DELE			<u> </u>	☐ Ch	ange Addition	
NAME				IAME				
STREET ADDRESS				TREET ADDRESS				
CITY-ST-ZIP				ITY-ST-ZIP				
TITLE		DELE1				Ch	ange Addition	
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	TREET ADDRESS				
CITY - ST - ZIP				ITY-SY-ZIP				
TITLE		DELEI		···· ·		Ch	ange Addition	
NAME			6.2 N	AME				
STREET ADDRESS			6.3 \$	TREET ADDRESS	,			
CITY-ST-ZIP			6.4 C	ITY-ST-ZIP				
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4. 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 12 or changed, or on in attachment with an address.

SIGNATURE:

landy

2/18/97

305-447-7898