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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000005633 (3)

PINNACLE SIX COMMUNICATIONS, INC.

1889/08 4/10 18/10 18/14 18/14 08/14 08/14 89/14 88/14 68/14 68/16 6/16 6/16 6/16 6/16 6/16

FILED

Jan 30 1998 8:00am

Secretary of State

District CD				}	BIBI 8:114 PIFBA 11188 1:11 1881
Principal Place	e of Business	Mailing Address			
2901 S. BAYS	SUITE 4-B 2901 S. BAYSHORE DRIVE COCONUT GROVE FL 33133 SUITE 4-B 2901 S. BAYSHORE DRIVE COCONUT GROVE FL 33133			DO NOT WRITE IN THIS SPACE	
Separation of the series occurred on the series of the ser			3. Date Incorporated or Qualified		
				12/13/1993	,
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 40			CUN Rd	13-3699489	Not Applicable
Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
22 <u>0 - E</u> 27 <u>0 - E</u>			<u>.</u>	Commode or states beamer	Fee Required
City & State . 23 Mami Bepch FL 28 Mich, Re			ACH, FC	6. Election Campaign Financing	\$5.00 May Be
Zip	County	28 11 1 (M) Be	Country	Trust Fund Contribution	Added to Fees
II 33 13	39 25 (3.5	33/39	- · · · C	 This corporation owes or has paid the c Personal Property Tax due June 30. 	urrent year intangible
	9. Name and Address of Current		<u> </u>	10. Name and Address of New Registered	
LANDY, RICHARD B1 Name					
1004 C DAVOUADE DO ADT A D				(DO D- 1) (
COCONUT GROVE FL 33133				ress (P.O. Box Number is Not Acceptable)	
			83		
			41 -		
			84 City	FI	85 Zip Code
11. Pursuant to the purisions of Sections 607/0502 and 607 1508. Florida Solutes the above pamed cornoration submits this statement for the purpose of changing its registered.					
office of 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 607-05/3. Florida Statutes.					
SIGNATURE I I M CW 3					
	Signal (re, typical or printed name or registimed agen		4		
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PCTD LANDY, RICHARD	[] DELETE	1.1 TITLE		Change Addition
NAME	2901 S. BAYSHORE DRIVE AF	OT 40	1.2 NAME		
STREET ADDRESS	COCONUT GROVE FL 33133	*1. 4*D	1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	\$D	DELETE	1.4 C(TY - ST - Z(P 2.1 T)TLE		Change Addition
NAME	DUNAY, ED W	- otterit	2.2 NAME		T cusuals T vacinate
STREET ADDRESS	300 EAST 57TH STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10022		2.4 CITY-ST-ZIP		,
TITLE	TIET TOTAL TOTAL	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STHEET ADDRESS		
CITY-ST-ZIP			3.4. CHY-SI-ZIP		
TITLE		DELETE	4.1 1/TLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		. –
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			64 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 angular report or supplemental admual 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 charged, or on an attachment with an address.