FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 F95000006231 (3) DOCUMENT #

1. Corporation Name

DATARADIO CORPORATION

| Principal Place of Business Mailing Address | | | | | |
|---|--|--|---|---|--|
| 6160 PEACHTRE ATLANTA GA 3 | EE-DUNWOODY ROAD. SUITE C-200 0328 | 6160 PEACHTREE-DUN ATLANTA GA 30328 | INOODY ROAD, SUITE C-200 | | |
| | | | | 3. Date Incorporated or Qualified 12/21/1995 | 3a. Date of Last Report |
| 2. Principal Plac | e of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 13-3281740 | Not Applicable \$8.75 Additional |
| Suite, Apt. #, | etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| City & State | | 28 | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation has liability for | |
| 24 | 25 | 29 | 30 | Florida Statutes Yes 10. Name and Address of New | |
| | 9. Name and Address of Current | Registered Agent | 81 Name | ID. Name and Address of New | |
| | | OTELL INIO | 1 1 | TO C. F. All the se Nel Accorde | h'o) |
| THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET | | | 82 Street Addi | 82 Street Address (P.O. Box Number is Not Acceptable) | |
| | | | 83 | | |
| SUITE 10 | o SSEE FL 32301 | | 85 0 | | 85 Zip Code |
| | | | 84 City | ration submits this statement for the pi | FL T |
| SIGNATURE | Signature, typed or printed name of registered agent. OFFICERS AND | | NOT: Registered Apont signature responsible | ADDITIONS/CHANGES TO OF | FICERS AND DIRECTORS IN 12 |
| TILE | PD | DELFTE | 1 1 TITLE | | Change Addition |
| NAME | ROULEAU, ROBERT T | | 1.2 NAME | | |
| STREET ADDRESS | 5500 AVE ROYALMOUNT, SU | TTE 200 | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | VILLE MONT-ROYAL, QUEBEC |) | 1.4 C(TY+S1+Z(F) | | Change Addition |
| TILE | DV | ☐ DELETE | 2 1 TITLE | | C. comilès C. comerce. |
| NAME | ROULEAU, ROBERT | | 2.2 NAME | | |
| STHEET ADDRESS | 808 THIRD STREET, SUITE C | | 2 3 STREET ADDRESS 2 4 CITY - ST - ZIP | | |
| CHTY-ST-7IP | NEPTUNE BEACH FL 32266 | [7] DELETE | 3 1 3 ITLE | | Change Addition |
| TITLE | S ZAVALKOFF, NORMAN | | 3 2 NAME | | |
| NAME STREET ADDRESS | 5500 AVE ROYALMOUNT, SU | ITE 200 | 3.3 STREET ADDRESS | | |
| CITY - S1 - ZIP | VILLE MONT-ROYAL, QUEBEC |) | 3 4 CITY - S1 - 7IF | | Character (T) Addition |
| TITLE | T | DELETE | 4 1 TITLE | | Change Addition |
| NAMÉ | SHAPIRO, PETER M | | 4.2 NAME | | |
| STHEFT ADDRESS | 5500 AVE ROYALMOUNT, SU | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | VILLE MONT-ROYAL, QUEBE | C DELETE | 4.4 CHY-SI-ZIF | | Change Addition |
| TITLF | | | 5 1 3/TLF | | |
| NAME | | | 5.2 NAME 5.3 STREET ADDRESS | | |
| STREET ADDRESS | | | 5.4 CHY- \$1 - ZIP | | |
| CITY - ST - ZIP | | DELETE | 6 1 TiTLE | | Change Addition |
| NAME | | | 62 NAME | | |
| STREET ADDRESS | | | 6 3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CRY+SI+ZIF | | 40 07/0//A Florida Ostados Madhar |
| 3711 31-21 | The second secon | with this filiper is volundarily | furnished and does not qualify | for the exemption stated in Section 1 | 19.07 (3)(K), Flurida Statutes, Fluriner |

14. I do hereby certify that the information supplied with this filing is votuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated by 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 certify that the information indicated by 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 certify that I am an officer or director of the corporation or the receiver or trustee impowered 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. 3/19/96 514-737-5432

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR