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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600006138 (9)

SELECT COMMUNICATIONS, INC.

Principal Place of Business

Mailing Address

400 E. CENTRE PARK BLVD. SUITE 205 DESOTO TX 75115 400 E. CENTRE PARK BLVD. SUITE 205 DESOTO TX 75115-8802

FILED May 09 1997 8:00am Secretary of State



DESOTO TX 7	5115		DESOTO TX 751	DESOTO TX 75115-8802						
							3. Date Incorporated or Qualified 11/22/1996	3a. Date of Last	Report	
2. Principal P	Place of Busin	ioss	2a. Mailing Add	2a. Mailing Address			4. FEI Number		Applied For	
21			26				75-2587329	75-2587329 Not Applicable		
Sulte, Apt. #, etc.			27				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24		Country 25	7ip 29	3	Gountry	<i>'</i>	This corporation has liability for in Florida Statutes	itangible tax under Yes 🔲 No	s. 199.032,	
	9. Name	and Address of	Current Registered Agent			T	10. Name and Address of New Reg	stered Agent		
		TION SYSTEM			81	Name				
		ine island ro	DAD		82 Street Addre		dress (P.O. Box Number is Not Acceptable)			
PLA	NTATION F	L 33324								
					83					
					84	City		B5 Zij	Code	
44 Durant	to the man in		007.00.00 - 1.007.4600 Et	tal All L		l		FL " · ·		
I OURGE OF I	មេប្តូរនេះមាមប ឧប្ព	ent, or boin, in in	e State of Florida, Such cha e obligations of, Section 607	nge was au	unorizea bi	z the con	I corporation submits this statement for the pupporation's board of directors. I hereby accept	rpose of changing the appointment a	its registered is registered	
SIGNATURE										
12.	Signature, lyped		tered agent and tide if applicable RS AND DIRECTORS	(NOTE F	18.	ant signature	E required which roinstalling)	DATE	50 11 15	
TITLE	CP	OFFICE		ELEVE	1.1 TOLE		ADDITIONS/CHANGES TO OFFICE	Change		
NAME	COLE, IV	ΔN	۵.	-211.2	1.2 NAME			L_ Change	[Xodillon	
STREET ADDRESS	500 OLDI				1.3 STREET	ADDRESS				
CITY-ST-ZIP		CHIE TX 75165			1.4 CHY-S					
TITLE	STD	51115 THE 10105		ELETE	2.1 1014	11-211		Change	Addition	
NAME	COLE, PE	GGY E			2.2 NAME				timo i i i i i i i i i i i i i i i i i i	
STREET ADDRESS	500 OLDI				2.3 STREET	ADDRESS			·	
CITY-ST-ZIP		CHIE TX 75165			2 4 CITY-1		٠,	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
TITLE				ELETE	3.1 TITLE	I.i III's		Change	Addition	
NAME					3.2 NAME					
STREET ADDRESS					3.3 STREET	ADDRESS				
City-St-ZIP					3 4. CITY - 9	ST- Z IP				
TITLE			0 🗆	ELETE	4 1 THLE			Change	Addition	
NAME					4 2 NAME					
STREET ADDRESS					4.3 STREET	ADDRESS				
CITY-ST-ZIP				**	4.4 CITY - S	1-7⊩				
TITLE			[] D	ELETE	5.1 TITLE			☐ Change	Addition	
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREE1	ADDRESS				
CITY-ST-ZIP					5.4 CITY - S	T - ZIP				
TITLE				CLETE	6.1 TITLE	:		Change	☐ Addition	
NAME					6.2 NAME	İ				
STREET ADDRESS					6.3 \$1REE1	ADDRESS				
CITY-ST-ZIP					6.4 CITY-S	1 - 7 1P			1	

14. 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 eath; 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.

IVAN COLE, PRESIDEN