

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

FILED

Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000005022 (5)**
1. Corporation Name
EXPLORER COMMUNICATIONS, INC.



Principal Place of Business 300 GREYTWIG ROAD #102 VERO BEACH FL 32963	Mailing Address 300 GREYTWIG ROAD #102 VERO BEACH FL 32963
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 207 OLD MEADOW WAY Suite, Apt. #, etc.		2a. Mailing Address 26 207 OLD MEADOW WAY Suite, Apt. #, etc.		3. Date Incorporated or Qualified 09/25/1997	
22 PALM BEACH Gdns. FL		27 PALM BEACH Gdns. FL		4. FEI Number 85-0314712	
23 3341P		24 USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
25 USA		28 USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
29 USA		30 USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent HOFFMAN, NANCY 200 GREYTWIG RD #102 VERO BEACH FL 32963				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable) 207 OLD MEADOW WAY	
83				84 City PALM BEACH GARDENS, FL 85 Zip Code 33418	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOFFMAN, JAMES F	1.2 NAME	
STREET ADDRESS	200 GREYTWIG ROAD #102	1.3 STREET ADDRESS	207 OLD MEADOW WAY
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S	2.2 NAME	
STREET ADDRESS	200 GREYTWIG ROAD #102	2.3 STREET ADDRESS	207 OLD MEADOW WAY
CITY-ST-ZIP	VERO BEACH FL	2.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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; that I am 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 in an attachment with an address.

SIGNATURE: *James F. Hoffman* **JAMES F. HOFFMAN** 1/20/98 (61) 776-8245

CR2E034 (10/97)