

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

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G98767 (8)

1. Corporation Name

HORIZON, A U.S. COMMUNICATIONS COMPANY

2. Principal Office Address

2a. Mailing Address

**999 PONCE DE LEON BLVD #600
CORAL GABLES FL 33134**

**999 PONCE DE LEON BLVD #600
CORAL GABLES FL 33134**

3. Date incorporated or qualified

3a. Date of first report

02/22/1984

04/20/1994

2. Principal Office Address

2a. Mailing Address

21. State Agent

26. State Agent

22. State Agent

27. State Agent

23. State Agent

28. State Agent

24. State Agent

29. State Agent

30. State Agent

4. FID Number

59-2378791

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for election law under 11C.01, F.S.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ESTRADA, FRED J
999 PONCE DE LEON BLVD.
SUITE 600
CORAL GABLES FL 33134**

81. Name

82. Street Address, P.O. Box, Apartment, Not Applicable

83. City

84. State

FL

85. Zip Code

11. I, the undersigned, the person or persons authorized to execute this Florida Statute, the duly authorized representative of the corporation, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the corporation is in compliance with the provisions of the Florida Statutes relating to the filing of this report.

Signature

12. Name and Address of Current Registered Agent

13. Name and Address of New Registered Agent

**PD
ESTRADA, ALFREDO J
999 PONCE DE LEON BLVD.
CORAL GABLES FL 33134
DC
ESTRADA, FRED
999 PONCE DE LEON BLVD.
CORAL GABLES FL
S
LEVY, BUDDY
7439 E. HILLSBORE AVE
TAMPA FL**

14. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the corporation is in compliance with the provisions of the Florida Statutes relating to the filing of this report.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALFREDO ESTRADA

05-15-96

442-2462