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PROFIT CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #**

H67704

(7)

FILED May 01 1996 8:00 am Secretary of State

GALACTICOMM, INC.	

Principal Place of Business Mailing Address 4101 SW 47TH AVE 4101 SW 47TH AVE SUITE 101 SUITE 101						
	DALE FL 33314	FT. LAUDERDALE FL	FT. LAUDERDALE FL 33314		3. Date Incorporated or Qualified 07/23/1985	3a. Date of Last Report 05/01/1995
2. Principal Place of Business 2a. Mailing Address 25				4. FEI Number 59-2572531	Applied For Not Applicable	
Suite, Apt. #, etc 22 City & State 23		Suite, Apt #, etc. 27 City & State 28		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
				Election Campaign Financing Trust Fund Contribution Added to Fees		
Ζφ 24	Country 25	Ζιρ 29	Country 30		This corporation has liability for Florida Statutes	intangible tax under s. 199.032,
	Name and Address of Current	Registered Agent			10. Name and Address of New F	legistered Agent
HUNT,MICHAEL J.			81	Name		ala)
1459 PLUNKETT ST HOLLYWOOD FL 33325			82 83	Stree	t Address (P.O. Box Number is Not Acceptat	ле)
HULLIF	100D FL 33325		84	City		85 Zip Code
			ا ا	٠.,		FL S Z COOK
12. TITLE	Signature types or penied rame of reposared agent a OFFICERS AND C STRYKER TIMOTHY J		13. 1. 1 THLE	Signature	resputed when registering ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12 Change
NAME STREET ADDRESS	STRYKER, TIMOTHY J 6115 HEUGHES CANYON WA	Y	1.2 NAME 1.3 STREET	ADDRESS		
CITY - ST - ZIP	SALT LAKE CITY UT 84121	E DE CIC	1.4 C:TY - S	- 71F		D Observe D Address
TITLE	CTOVED CUDICTINE V	☐ DELETE	2 1 T:TLE		D CONTRACTORNE	☐ Change 🔀 Addition
NAME STHEET ADDRESS	STRYKER, CHRISTINE V 6115 HEUGHES CANYON WA	Y .	2 2 NAME 2 3 STREET	ADDRESS	ROBERT, CHRISTOPHER 526 RADFORD TERR	
CITY ST-ZIP	SALT LAKE CITY UT 84121		2.4 CITY - S		DAVIE FL 33325	
TITLE	D	DELETE	3 1 TiTLE			Change Addition
NAME	STEIN, ROBERT N		3.2 NAME			
STREET ADDRESS	9856 NW 1ST CT PLANTATION FL		33 STREET		TIGOT GIVE CINC	LE 23334
CHY+ST-ZIP THTLE	PD PD	DELETE	3 4 CITY - S 4 1 TITLE	- ZIP	FORT LAUDERDALE	33326 ▼Change ☐ Addition
NAME	BRINKER, SCOTT J	C) become	4.2 NAME		M/D	Exemply [] Notified
STREET ADDRESS	620 E PLANTATION CIRCLE		4.3 STREET	ADDRESS		
CITY - ST - ZIP	PLANTATION FL		4.4 CITY - S			
THILE	V	X DELETE	5 TITLE		P/D	Change 🔼 Addition
NAME	HAURY, LINDA		5.2 NAME		SHAW, ROBERT	
STREET ADDRESS	412 BONTONA AVE		53STREET	AODRESS	2580 SWEETWATER	
CITY+ST-ZIP	FT LAUDERDALE FL		5.4 CITY - \$	[-7IP]	MAITLAND FL 32	าร
TITLE	V	DELETE	6 1 TITLE		S	Change 🔲 Addition
NAME	HUNT, MICHAEL J.		6.2 NAME			
STREET ADORESS	1459 PLUNKETT STREET		63STREET	ADDRESS		
	It I VANCII W I LI		-		1	

14. I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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

SIGNATURE:

Michael H. Hunt Michael SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL J. HUNT

4/25/96

954-583-5990