

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

FILED

Jan 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # H67704 (7)

1. Corporation Name  
GALACTICOMM, INC.

Principal Place of Business  
4101 SW 47TH AVE  
SUITE 101  
FT. LAUDERDALE FL 33314

Mailing Address  
4101 SW 47TH AVE  
SUITE 101  
FT. LAUDERDALE FL 33314-4029



3. Date Incorporated or Qualified  
07/23/1985

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

59-2572531

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 intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HUNT, MICHAEL J.  
1459 PLUNKETT ST  
HOLLYWOOD FL 33325

10. Name and Address of New Registered Agent

81 Name

TESSIER, YANNICK

82

Street Address (P.O. Box Number is Not Acceptable)

10931 NW 3RD STREET

83

84

City

PLANTATION

FL

85

Zip Code

33324

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

*Yannick Tessier*

YANNICK TESSIER PRESIDENT

1/15/97

(Signature of officer or director of corporation or registered agent and title, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C	<input checked="" type="checkbox"/> DELETE
NAME	STRYKER, TIMOTHY J	
STREET ADDRESS	6115 HEUGHES CANYON WAY	
CITY - ST - ZIP	SALT LAKE CITY UT 84121	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	STRYKER, CHRISTINE V	
STREET ADDRESS	6115 HEUGHES CANYON WAY	
CITY - ST - ZIP	SALT LAKE CITY UT 84121	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	STEIN, ROBERT N	
STREET ADDRESS	1287 GINGER CIRCLE	
CITY - ST - ZIP	FT LAUDERDALE FL	
TITLE	MD	<input checked="" type="checkbox"/> DELETE
NAME	BRINKER, SCOTT J	
STREET ADDRESS	620 E PLANTATION CIRCLE	
CITY - ST - ZIP	PLANTATION FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	SHAW, ROBERT	
STREET ADDRESS	2580 SWEETWATER TRAIL	
CITY - ST - ZIP	MAITLAND FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	HUNT, MICHAEL J.	
STREET ADDRESS	1459 PLUNKETT STREET	
CITY - ST - ZIP	HOLLYWOOD FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C/S AND CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	BERG, PETER	
1.3 STREET ADDRESS	15050 SW 10TH STREET	
1.4 CITY - ST - ZIP	SUNRISE FL 33326	
2.1 TITLE	P/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	TESSIER, YANNICK	
2.3 STREET ADDRESS	10931 NW 3RD STREET	
2.4 CITY - ST - ZIP	PLANTATION FL 33324	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MAHONEY, TIMOTHY E.	
3.3 STREET ADDRESS	68 CAYMAN PLACE	
3.4 CITY - ST - ZIP	PALM BEACH, FL 33418	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	STENBAEK, CLAUS H.	
4.3 STREET ADDRESS	10 CAMBRIDGE ROAD - TWICKENHAM	
4.4 CITY - ST - ZIP	LONDON ENGLAND TW1 2HN	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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 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:

*Yannick Tessier*

YANNICK TESSIER

1/15/97

954-583-5990

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

0273525

CR2E034 (9/96)