SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

FILED

Secretary of State

6-7-96 (305)556-7261

Jun 11 1996 8:00 am

1996

DOCUMENT #

SIGNATURE: L

H86222

(7)

ADVERTISING TECHNOLOGY COMMUNICATIONS, INC.

Principal Place of Business Mailing Address % DANIEL K. PALMER 14361 COMMERCE WAY % DANIEL K. PALMER 14361 COMMERCE WAY MIAMI LAKES FL 33016 MIAM! LAKES FL 33016 3. Date Incorporated or Qualified 3a. Date of Last Report 11/18/1985 05/01/1995 4. f El Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2609596 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 50175 Fee Required $O_{U_I \neq C}$ City & State City & State \$5.00 May Be Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032 Yes No 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PALMER, DANIEL K. 8540 N.W. 49 DR. Street Address (P.O. Box Number is Not Acceptable) CORAL SPGS. FL 33067 83 85 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Significe typod or protect content of registrated agent and the dispilibitation. CPCTE Registered Agent sposture required who are instance; OAS: 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 11 TITLE QUINLIVAN, WILLIAM R. NAME 1.2 NAME 1224 BUCHANAN ST. STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD LAKES FL CITY-ST-ZIP 14 CHY-ST-78 DELETE 21 THTL€ Change Addition TITLE PALMER, DANIEL K. NAME 2.2 NAME 8540 N.W. 49 DR. STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP CORAL SPGS. FL 2 4 CITY - ST - ZIP DELETE TITLE 31 TITLE Change ____ Addition 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP DELETE Change Addition TITLE 4 1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - 7/F CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6 4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Flor da 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.