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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J24146

1. Corporation Name

DIGHCELL COMMUNICATIONS, INC.

(9)

FILED Apr 23 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Addr	ess				*****	J. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
414 S. BROAD STREET BROOKSVILLE FL 34601		414 S. BROAD STREET BROOKSVILLE FL 34801-2826							
						3. Date Incorporated or Qualified 07/14/1986	3a. Date 09/23/		leport
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number	1. , , , ,	Ar	oplied For
21		26				59-2688304 Not A			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		8.75	Additional
22		27				8. Certificate of Status Desired		Fee Re	equired
City & State		City & State				6. Election Campaign Financing			
23		28				Trust Fund Contribution	<u>LJ</u>	Added	to Fees
Zip	Country	Zip		Country		8. This corporation has liability for i			. 199.032,
24	25 2. Name and Address of Currer	29]	30	l			Yes 1		
1101		it negistelen Age		81	Name	10. Name and Address of New Re-	istered Age	nt	
	RRILL, KEVIN			[0,	Hame				
	S. BROAD STREET			82	Street Add	ress (P.O. Box Number is Not Acceptab	e)		
BHC	OCKSVILLE FL 34601			83					
				53					
				84	City		 8	5 Zip i	Code
							FL °		
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State)2 and 607.1508, Fi e of Florida. Such cl	lorida Statutes. 1 hange was auth	the above orized by	e-named cor Fithe corpora	poration submits this statement for the pition's board of directors. I hereby accep	urpose of cha t the appoint	anging it ment as	s registered registered
agent. I a	m familiar with, and accept the oblig-	ations of, Section 6	607.0505, Florida	a Statutes	š. '				
SIGNATURE									
12,	Signature, typed or printed name of registered age	ent and tile if applicable D DIRECTORS	(NOTE: Re		nt signature requ	red when reinstating)	DATE.	DEOTO:	0 111 40
TITLE	PD		DELETE	13.		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	MORRILL, KEVIN	L	DECENC	1.2 NAME				Onlings	☐ VOOIIION
STREET ADDRESS	506 COLONIAL DRIVE				*DODECC				
	BROOKSVILLE FL 34601			1.3 STREET	j				
CITY-ST-ZIP TITLE	D		DELETE	1.4 CITY - S 2.1 TITLE	1-ZIP			Change	Addition
NAME	REGISTER, MAX	ا	DITTIL					Change	L_J AUGRION
STREET ADDRESS	9863 DOMINGO DRIVE			2.2 NAME	4000000				
1	BROOKSVILLE FL 34601			2.3 STREET					
CITY-ST-ZIP	80		DELETE	2 4 CHY-5 3 1 TITLE	51 - ZIP			Change	Addition
NAME	MORRILL, LYNN		, otto				Ц	Change	☐ Addition
	506 COLONIAL DR.			32 NAME	1000000				
STREET ADDRESS	BROOKSVILLE FL 34601			33 STHEET					
CITY-ST-ZIP TITLE	PHOOUSAILTE LE 24001		DELETE	3 4. CITY - 5	51 - ZIP			Change	Addition
		اسا	I DETETE	4 1 TITLE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET					
CITY-ST-ZIP			beitze	4.4 CHY-S	1 - ZIP		·····	01.	
TITLE		L	DELETE	5.1 TITLE				Change	☐ Addition
NAME			ı	5 2 NAME					
STREET ADDRESS			ı	5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CITY - S	T- ZIP		····		
TITLE			DELETE	6 1 TITLE				Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
ANTY AT TID									

CITY-S1-ZIP
 6.4 CITY-S1-ZIP
 1. 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 75 M M KANIN F Marcil Paril & 4.0-02 (85) CHUAGO