

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90152 033 ***150.00

DOCUMENT # K45047

1. Corporation Name
ALMAC MOBILE COMMUNICATIONS, INC.

Principal Place of Business
5100 S. DIXIE HWY 13
W PALM BEACH FL 33405

Mailing Address
5100 S. DIXIE HWY 13
W PALM BEACH FL 33405



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/14/1988

4. FEI Number
65-0082700

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 1800 FOREST HILL BLVD

2a. Mailing Address
26 1800 FOREST HILL BLVD

Suite, Apt. #, etc.
22 A5

Suite, Apt. #, etc.
27 A5

City & State
23 WEST PALM BEACH, FL

City & State
28 WEST PALM BEACH, FL

Zip
24 33406

Country
25 PALM BEACH

Zip
29 33406

Country
30 PALM BEACH

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TALAFOUS, GEORGE A.
5100 S DIXIE HWY #13
WEST PALM BEACH FL 33405

81 Name
GEORGE TALAFOUS

82 Street Address (P.O. Box Number is Not Acceptable)
1800 FOREST HILL BLVD

83 A5

84 City
WEST PALM BEACH FL

85 Zip Code
33406

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME TALAFOUS, GEORGE A.
STREET ADDRESS 5100 S. DIXIE HWY
CITY-ST-ZIP W PALM BEACH FL ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE V
NAME TALAFONS, JOAN C.
STREET ADDRESS 5100 S. DIXIE HWY #13
CITY-ST-ZIP WEST PALM BEACH FL ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE TALAFOUS

4/29/99 (521)965-8100

Date

Daytime Phone #

CR2E034 (11/98)

0324234