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Mar 25 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 # **K53915** (0)
1. Corporation Name:
BROADBAND COMMUNICATIONS PRODUCTS, INC.

Principal Place of Business
**305 EAST DR #A
MELBOURNE FL 32904
US**

Mailing Address
**305 EAST DR #A
MELBOURNE FL 32904-1033
US**



3. Date Incorporated or Qualified
12/14/1988 3a. Date of Last Report
01/31/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2926871		Applied For <input type="checkbox"/> Not Applicable	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22. City & State		27. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
23. Zip		28. Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
24. Country		29. Country					
25. Country		30. Country					

9. Name and Address of Current Registered Agent

**TOY, JAMES W.
2811 S. CAMERON STREET (HOME)
MELBOURNE FL 32901**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL
85. Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
T NAME ALFORD, DONALD R. STREET ADDRESS 2608 S. FORREST DRIVE CITY- ST- ZIP MELBOURNE FL	<input type="checkbox"/> DELETE	1.1 TITLE VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VS NAME CASPER, PAUL W. STREET ADDRESS 8592 SYLVAN DRIVE CITY- ST- ZIP MELBOURNE FL	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
V NAME BREITMEIER, JAMES W. STREET ADDRESS 417 SUNSET BLVD. CITY- ST- ZIP MELBOURNE BEACH FL	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P NAME TOY, JAMES W. STREET ADDRESS 2811 S. CAMERON STREET CITY- ST- ZIP MELBOURNE FL	<input type="checkbox"/> DELETE	4.1 TITLE TREASURER/VICE PRES.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	5.1 TITLE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	6.1 TITLE DR. ALLEN S. HENRY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	7.1 TITLE 218 4th AVE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	8.1 TITLE MELBOURNE, FL 32951	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 furnished 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: *James W. Toy* 3/13/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (9/96)