FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAR 22 PM 3:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K84610 (0)

1. Corporation Name
AA COMMUNICATIONS SERVICES CORP.

Principal Place of Business	Mailing Address
% RODOLFO J. RODRIGUEZ JR. 6320 MIRAMAR PKWY STE. B MIRAMAR FL 33023	% RODOLFO J. RODRIGUEZ JR. 6320 MIRAMAR PKWY STE. B MIRAMAR FL 33023

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/01/1989
3a. Date of Last Report: 04/05/1994

2. Principal Place of Business
21: 6419 SW 19 STREET
22: Suite, Apt. #, etc.
23: City & State: MIRAMAR, Florida
24: Zip: 33023
25: Country: Broward

2a. Mailing Address
26: P.O. Box 5205
27: Suite, Apt. #, etc.
28: City & State: Hollywood, Florida
29: Zip: 33083
30: Country: Broward

4. FEI Number: 65-0119836 ☐ 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

RODRIGUEZ, RODOLFO J., JR.
3519 SW 69 WAY
MIRAMAR FL 33023

10. Name and Address of New Registered Agent

81 Name: Rodolfo Rodriguez Jr.
82 Street Address (P.O. Box Number is Not Acceptable): 6419 S.W. 19 STREET
83:
84 City: MIRAMAR FL 85 Zip Code: 33023

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PT	1.1 TITLE	P.T.	☒ Change ☐ Addition
NAME	RODRIGUEZ, RODOLFO J.	1.2 NAME	Rodriguez Rodolfo J.	
STREET ADDRESS	3519 SW 69 WAY	1.3 STREET ADDRESS	6419 SW 19 STREET	
CITY-ST-ZIP	MIRAMAR FL	1.4 CITY-ST-ZIP	MIRAMAR, FL.	
TITLE	VS	2.1 TITLE	V.S.	☒ Change ☐ Addition
NAME	RODRIGUEZ, MARITZA	2.2 NAME	Rodriguez Maritza	
STREET ADDRESS	3519 SW 69 WAY	2.3 STREET ADDRESS	6419 SW 19 STREET	
CITY-ST-ZIP	MIRAMAR FL	2.4 CITY-ST-ZIP	MIRAMAR, FL.	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3. STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
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)(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: Rodolfo J. Rodriguez Jr. 3-16-95 (305) 966-4474
SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004704 CR