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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mörtham 🕑

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K96286

(5)

TURNER COMMUNICATIONS CORP.

FILED					
Apr 23 1998	8:00am				
Secretary o	f State				

Principal Plac	e of Business	Mailing Address	, , , , , , , , , , , , , , , , , , ,	
404 WASHING	BTON AVE	404 WASHINGTON AVE		
600 Miami Beach	I EI 93130	600 MIAMI EBACH FL 33139		DO NOT WRITE IN THIS SPACE
US DEACH	176 90109	US		3. Date Incorporated or Qualified
				06/19/1989
,	lace of Business	2a. Mailing Address		4. FEI Number Applied For
Sulte, Apt.	# ata	26 Cuito Ant 4 ata		65-0129506 Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired Security Securi
City & Stat	е	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	X	81 Name	10. Name and Address of New Registered Agent
	RPORATION COMPANY OF MIAM	l		AWRENCE D. TURNER
) CHOPIN PLAZA ITE 1500			oddress (P.O. Box Number is Not Acceptable)
1	MI FL 33131		83	WASHINGTON AUG
******			بہری ا	TE 600
			84 City	FL 85 Zip Code 33139
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above-named o	corporation submits this statement for the purpose of changing its registered
agent. I a	in familiar with, and accept the obligat	ions of, Section 607.0505, Fi	autnorized by the corpo lorida Statules.	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	- bans	1		1/12/94
12.	Signate Appending scripted proper of recovered agent		It: Flogistered Agent a gnature re	
TOLE	D OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	BACKUS, ROBERTA		1.2 NAME	, Li onungo Li ruonion
STREET ADDRESS	404 WASHINGTON AVE #600		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY - ST - ZIP	
TITLE	D	DELETE	2.1 TITLE	Change Addition
"NAME, "	TURNER, LAWRENCE O		2.2 NAME	•
STREET ADDRESS	404 WASHINGTON AVE #600		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL	DELETE	2. 4 CITY - ST - ZIP	
TITLE NAME		בן טנננונ	3.1 TITLE	L Change
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-SY-ZIP	
TITLE		DELETE	41 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE	·	☐ DEŁETĘ	5.1 TITLE	☐ Change ☐ Addition
NAME	•		5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		Priese	5.4 CITY - ST - ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME OTRUCT ADDRESS			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
14. I hereby o	certify that the information supplied with	this filing does not qualify f	6.4 CITY-ST-ZIP or the exemption stated	f in Section 119.07(3)(i), Florida Statutes. I further certify that the information
Indicated officer or	on this annual report or supplemental.	annual report is true and acc ver or trustee empowered to	curate and that my sign:	ature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in