


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

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May 03, 1999 8:00 am
Secretary of State

05-03-1999 90012 029 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L34138					
1. Corporation Name ATLANTIC BUSINESS COMMUNICATIONS OF ORLANDO, INC					
Principal Place of Business 4319 35TH STREET #E ORLANDO FL 32811 US			Mailing Address 4319 35TH STREET #E ORLANDO FL 32811 US		
2. Principal Place of Business 21 Same Suite, Apt. #, etc.		2a. Mailing Address 26 Same Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/04/1989	
22 City & State		27 City & State		4. FEI Number 59-2978318 Applied For Not Applicable	
23 Zip Country		28 Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 <input type="checkbox"/> 25		29 <input type="checkbox"/> 30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent BOTBOL, JOEL D. 4301 VINELAND ROAD ORLANDO FL 32811			10. Name and Address of New Registered Agent 81 Name Botbol, Joel D. 82 Street Address (If Block Number is Not Acceptable) 4319 35th St. Ste E 83 84 City Orlando FL 85 Zip Code 32811		
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] DATE 4-27-99 (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS					
1.1 TITLE President/CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
1.2 NAME Botbol, Joel D.					
1.3 STREET ADDRESS 4319 35th St. Ste E Orlando, FL 32811					
1.4 CITY-ST-ZIP					
2.1 TITLE VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
2.2 NAME Botbol, Kimberly F.					
2.3 STREET ADDRESS 4319 35th St. Ste E Orlando, FL 32811					
2.4 CITY-ST-ZIP					
3.1 TITLE					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					



DO NOT WRITE IN THIS SPACE

SIGNATURE: **[Signature]** REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-27-99 (407) 8121170

CR2E034 (11/98)