Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

Not Applicable

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



DIVISION OF CORPORATIONS

## FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State

FILED

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90162 018 \*\*\*150.00

Corporation Name	1110200	•
VERO BEACH	COMMUNICATIONS.	INC

Country

9. Name and Address of Current Registered Agent

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DOCUMENT # MA2097

Principal Place of Business 4700 39TH AVE VERO BEACH FL 32967

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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23

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Zip

Mailing Address

4700 39TH AVE

2a. Mailing Address

Suite, Apt. #, etc.

City & State

VERO BEACH FL 32967

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

05/20/1988

59-2900238

FEI Number

11. Piresuant to the provisione of Sections 607.0502 and 607.1508. Florids 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 Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and sine if applicables and interest agent, and accept the obligations of, Section 607.0595, Florids Statutes.    SIGNATURE	SALTER, CHRISTINE 4700 39TH AVE VERO BCH. FL 32967		81 82 83 84		et Address (P.O. Box Number is Not Acceptable)  FL 85 Zip Code
12	office or re	egistered agent, or both, in the State of Florida. Such change was auth	orized by	the corp.	ed corporation submits this statement for the purpose of changing its registered
12	SIGNATURE	Classical Annual Company of Secretarial County and title if applicable (NOTE: Re-	nietorod Aner	t cionatura r	re-required when reinstation) DATE
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Country

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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.

5 61 - 567- 9000 Ext 489