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May 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # M90741 (3)  
1. Corporation Name  
ESCOM, INC.



Principal Place of Business  
1800 EAST ROBINSON STREET  
ORLANDO FL 32803

Mailing Address  
1800 EAST ROBINSON STREET  
ORLANDO FL 32803

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/25/1988	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2900274	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent SPENCER, STEVEN A. 1900 EAST ROBINSON STREET ORLANDO FL 32803		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	

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	
TITLE	PST	1.1 TITLE	PS
NAME	HOOPER, GREGORY M.	1.2 NAME	Hooper, Jacqueline M
STREET ADDRESS	7912 SNOWBERRY CIRCLE	1.3 STREET ADDRESS	7912 Snowberry Circle
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	Orlando, FL 32819
TITLE	D	2.1 TITLE	D
NAME	HOOPER, GREGORY M.	2.2 NAME	Hooper, Jacqueline
STREET ADDRESS	7912 SNOWBERRY CIRCLE	2.3 STREET ADDRESS	7912 Snowberry Circle
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	Orlando, FL 32819
TITLE		3.1 TITLE	VT
NAME		3.2 NAME	Hooper, Gregory M
STREET ADDRESS		3.3 STREET ADDRESS	7912 Snowberry Circle
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Orlando, FL 32819
TITLE		4.1 TITLE	D
NAME		4.2 NAME	Hooper, Gregory M
STREET ADDRESS		4.3 STREET ADDRESS	7912 Snowberry Circle
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Orlando, FL 32819
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

Gregory M. Hooper

3/10/98 (407) 295-7894

CR2E034 (10/97)