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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M98397 1. Corporation Name

BETTER BUSINESS COMMUNICATIONS, INC.

Principal Place	e of Business	Mai	iling Address				
9500 INTERNATIONAL CT 9400 INTERNATIONAL CT							
#9525 ST PETESBURG FL 33716 US			25				DO NOT WRITE IN THIS CRACE
			ST. PETERSBURG FL 33716 US				DO NOT WRITE IN THIS SPACE
บจ		03					3. Date Incorporated or Qualifed
							09/14/1988
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number Applied For
21		26					59-2909551 Not Applicable
Suite, Apt.	#, etc.	$\vdash$	Suite, Apt. #, etc.			_	5. Certificate of Status Desired   \$8.75 Additional
22		27					Fee Required
City & Stat	e		City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Country	ļ	Zip	Cou	ntry	'	8. This corporation owes the current year Intangible
24	25	29		30			Personal Property Tax. Yes No
	9. Name and Address of Currer	nt Registe	ered Agent			Г :::	10. Name and Address of New Registered Agent
0445	TOROLO LEONARD A ID				81	Name	
SANTOPOLO, LEONARD A JR.				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
5732 BAY ST., NE ST PETE FL 33703							
STP	ETE FL 33703				83		<del></del>
					-	0.4	85 Zip Code
					84	City	FL 85 Zip Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida	a. Such change was a	authorized	l by	the corpora	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
SIGNATURE					_		ouired when reinstating) DATE
	Signature, typed or printed name of registered age		<del></del>		Ager	nt signature requ	quired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AN	ND DIREC	DELETE	13.	пс		Change Addition
TITLE	PD 1005DU D						C ournite
NAME	SPANGLER, JOSEPH R.			1.2 NA			
STREET ADDRESS	3301 12 ST. NORTH					TADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL			1.4 CF		T-ZIP	Change C Addition
TITLE	VD		☐ DELETE	2.1 📆	TLE		Change Addition
NAME	SPANGLER, JOSEPH R.			2.2 NA	ME		
STREET ADDRESS	3301 12TH ST., N.			2.3 ST	REE	TADDRESS	والمراجع والمتعارض والمتعا
CITY-ST-ZIP	ST. PETERSBURG FL			2.4 C	TY-S	ST- ZIP	
TITLE	SD		□ DELETE	3.1 ⊞	ΠE		☐ Change ☐ Addition
NAME	SPANGLER, JOSEPH R.			3.2 NA	ME		
STREET ADDRESS	3301 12TH STREET, NORTH			3.3 ST	REE	TADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL			3.4. C	TY-S	ST-ZIP	
TITLE	TD		☐ DELETE	4.1 Til			☐ Change ☐ Addition
NAME	SANTOPOLO, LEONARD A. JR	₹		4. 2 N	AME		
STREET ADDRESS	5732 BAY ST., NE	-		- 1		TADDRESS	
	ST. PETERSBURG FL						
CITY-ST-ZIP TITLE	OI. I ETERODURG I E		☐ DELETE	4.4 CF 5.1 TH		1-ZIF	☐ Change ☐ Addition
				5.2 NA			
NAME						T ADDRESS	
STREET ADDRESS				5.4 CI			·
CITY-ST-ZIP			☐ DELETE	6.1 TI		1-217	☐ Change ☐ Addition
TITLE			C AFTE IF	1			□ Cutatile □ Madition
NAME				6.2 NA			
CTREET ANDRESS				■ 6.3 ST	REE	TADDRESS	

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.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

**FILED** 

Feb 18, 1999 8:00am

**Secretary of State** 

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