FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1. Corporation		06 (2)			
IW CO	MMUNICATION CORP.				
Principal Place	of Business	Mailing Address			DITO ADIA GARA DIDA GARA BADA BADA BADA
81 EXECUTIVE BLVD. FARMINGDALE NY 11735		81 EXECUTIVE BLVD. FARMINGDALE NY 117	35		
				 Date Incorporated or Qualified 01/26/1987 	3a. Date of Last Report 02/21/1995
2. Principal Place	ce of Business	2a. Mailing Address 26		4. FEI Number 11-2255468	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	□ \$5.00 May Be
Ζφ 2φ	Country 25	Ζιρ	Country	B. This corporation has liability fo	r intangible tax under s 199.032,
<u></u>	9. Name and Address of Curre	29 ent Registered Agent	30	Florida Statutes X Ye 10. Name and Address of New	S No
			81 Name	10, Numb and Address of New	nagisteleu Agent
XL CORPORATE SERVICES, INC. 216 W. COLLEGE AVENUE TALLAHASSEE FL 32301			82 Street A	ddress (P.O. Box Number is Not Accepta	able)
			83		
			84 City		FL 85 Zip Code
 Pursuant to or registerer familiar with 	the provisions of Sections 607.050 diagent, or both, in the State of Flor Land accept the obligations of Sec	02 and 607.1508, Florida Statute rida. Such change was authorize ction 607.0505, Florida Statutes	s, the above named cor ed by the corporation's b	poration submits this statement for the proporation of directors. I hereby accept the ap	urpose of changing its registered office pointment as registered agent. I am
SIGNATURE	light from hyperi or printed name of registere hage				
12.		ND DIRECTORS	E Registered Agent signature rei	· · · · · · · · · · · · · · · · · · ·	FICERS AND DIRECTORS IN 12
TIFLE	PS	DELETE	1. 1 TITLE	TO STANDING TO STANDED TO ST	Change Addition
NAME	GOODSTEIN, EDWARD		1.2 NAME		
STREET ADDRESS	606 MICHELLE PLACE		1.3 STREET ADDRESS		
CHY ST-ZIP	NO WOODMERE NY CFO	F) D(IE)	1.4 CITY - ST - ZIP		~ · · ·
NAME	PALAZZOLO, CARL G	DEFEAT	2 1 TITLE		Change Addition
STAFFE LADDRESS	32 TAYLOR AVE.		2 2 NAME 2 3 STREET ADDRESS	18 TEFFERSON	AVE
City - ST - ZIP	EAST ISLIP NY		2.4 CITY - ST - ZIP	18 JEFFERSON EAST ISLIP N	V 11730
TiTLE	V	☐ DELETE	3 1 THE	21101 13=11 10	Change Addition
NAME	Griffith, Howard		3 2 NAME		
STREET ADDRESS	14 SPRINGBROOK RD		3.3 STREET ADDRESS	17 FOREST ROA	
Crity - \$1 - 7/P	MORRISTOWN NJ		3 4 CITY - \$1 - 7IP	SAG HARBOR NY	11963
TITLE		☐ DELETE	4. 1 TILE		Change
NAME			4.2 NAME		
STELL LADDRESS CITY+S1-ZIP			4.3 STREET ADDRESS		
TIPLE		☐ DELETE	4.4 CITY - \$T - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		_ one-igo
STREET ADDRESS			5 3 STREET ADDRESS		
C-TY-ST-ZE			54 CHY+ST-ZIP		
Tall F		☐ DELETE	6 1 THLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
011Y \$1-7IP	certify that the information supplied	with this filing is valuntarily funcie	64 CHY-S1-ZIP	fy for the exemption stated in Section 119	07/2001 Florido Pentidos 14 mil
oath, that I	ne information indicated on this ann	iual report or supplemental annu oration or the receiver or trustee	al report is true and acc empowered to execute	ly for the exemption stated in Section 11st urate and that my signature shall have the this report as required by Chapter 607, F	a samo loggi affact as if made under
SIGNATU	IDE. Calif	1 1da - 1		2/23/16	

Daytime Phone #