FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

'95 APR 18 PM 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000020908 (8)**

1. Corporation Name
TOTAL COMMUNICATIONS CONCEPT, INC.

Principal Place of Business	Mailing Address
7572 WEST 30TH COURT HIALEAH GARDENS FL 33016	7572 WEST 30TH COURT HIALEAH GARDENS FL 33016

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/19/1993**
3a. Date of Last Report: **07/28/1994**

21 2. Principal Place of Business	26 2a. Mailing Address: 15476 NW 77 Ct	4. FEI Number: **65-0398659**	☐ Applied For ☐ Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.: 317	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
23 City & State	28 City & State: MIAMI FL	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
24 Zip / 25 Country	29 Zip: 33016 / 30 Country: USA	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JONES, MERY 7572 WEST 30TH COURT HIALEAH GARDEN FL 33016	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City: **FL** 85 Zip Code

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 _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	P/D ☒ Change ☐ Addition
NAME	JONES, MERY	12 NAME	JONES, MERY Hilda
STREET ADDRESS	7572 WEST 30TH CT.	13 STREET ADDRESS	7572 W. 30 Ct
CITY ST ZIP	HIALEAH GARDENS FL 33016	14 CITY ST ZIP	Hialeah Gardens, FL 33016
TITLE		21 TITLE	V ☐ Change ☒ Addition
NAME		22 NAME	JONES, SARAH JANE
STREET ADDRESS		23 STREET ADDRESS	7672 W. 30 Ct
CITY ST ZIP		24 CITY ST ZIP	Hialeah Gardens, FL 33016
TITLE		31 TITLE	M ☐ Change ☒ Addition
NAME		32 NAME	POLANCO, AIDA M.
STREET ADDRESS		33 STREET ADDRESS	2560 W. 54 St
CITY ST ZIP		34 CITY ST ZIP	Hialeah, FL. 33016
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Mery Jones - MERY JONES 4-1-95 (305)267-7202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000073 CP