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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P93000055937	(5)

GRAPH	IIC COMMUNICATORS US ce of Business ve	• •	l		3a. Date of Last Report
2. Principal I	Place of Business	28. Mailing Address		08/10/1993 4. FEI Number	03/29/1996 Applied For
21		26		65-0429757	Not Applicable
Suite. Apt	t.# etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ile	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for inte	
24	25 9. Name and Address of Cur		30	Florida Statutes 10. Name and Address of New Regis	Yes No
AD.	AMS, POT F SR	Tent Hogisteron Agent	81 Name		stelen Agent
	700 SYM 1TH PLACE		62 Street Add	91EK G. Sulyof dress (P.O. Box Number iş Not Acceptable)	
F0	RT AUDERDALE FL 33325		9000	o Jacaranda Lanc	# 202
	•		83		
			84 City	2 axet ati	85 Zip Code
11 Percentin	t to the provinces of Cactions 607	0502 and 607 1508 Florida Statuto	e the above named co	rporation submits this statement for the pur	FL 33324
SIGNATURE	Signature Typing or proved harbolot regularies	i agent and litte if applicable (NØIE AND DIRECTORS	Registered Agent signature requ	ACES INC. Three when reinstating) ADDITIONS/CHANGES TO OFFICE	
TITLE	SULYOK, ALEX	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME STREET ADORESS	OCCO LACADANDA LANE L	STF - 202	1.2 NAME 1.3 STREET ADDRESS		
CHY-ST-7P	PLANTATION FL	OIR EVE	1.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	2.1 TITLE		Change Addition
NAME	SULYOK, FRANCES KRAMI		2.2 NAME		
STREET ADORESS		STE - 202	2.3 STREET ADDRESS		
CITY ST-7IP	PLANTATION FL	DELETE	2. 4 CITY - ST - ZIP 31 TITLE	-	Change Addition
TITLE NAME			32 NAME		[] change [] Volum
STREET ADORESS	,		3.3 STREET ADDRESS		
CITY-ST ZIF			3.4. CITY - \$1 - ZIP		
Tilté		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CiTY - ST - 7IP TITLE		DELETE	4.4 CHY-ST-ZIP 5 1 TITLE		Change Addition
NAML		- Precit	5.2 NAME		time with go being regulation.
STREET ADDRESS	;		5.3 STREET ADDRESS		
CHTY+S1+Z+F			5.4 CITY-ST-ZIP		
THEF		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ACORESS	i		6.3 STREET ADDRESS		

SIGNATURE:

Support ALEK Sulyok SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this filling 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.

FILED

Apr 23 1997 8:00am

Secretary of State

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