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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

<u></u>	1996	DIVISION OF C	ORPORATIC	S			
DOC 1. Corpora	UMENT # P9400	0019538 (5)					
	ANCED COMMUNICATION SI	ERVICES, INC.					
Principal P	hace of Business	Mailing Address			I #451#361 1#3 #4111 #16## 46## 66## 61##	00     \$\$\\$	J GUIRDO ULUDI: UEAL IUDE
8424 FOU	IRTH STREET NORTH	8424 FOURTH STREET NO	ORTH				
STE. N	RSBURG FL 33702	STE. N St. Petersburg fl 337	no				
or retailed to some				3. Date incorporated or Qualified 3a. Date of Last Repo 03/09/1994 02/17/1995			
	at Place of Business	2a. Mailing Address			4. FEI Number 65-0470650	·	Applied For
21 Suite A	Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$£	Not Applicable  3.75 Additional
22		27		5. Certificate of Status Desired	1 1 7 -	Fee Required	
City & S	State	City & State			Election Campaign Financing     Trust Fund Contribution	1 1	5.00 May Be Added to Fees
<b>23</b> Zip	Country	Zip	Country		8. This corporation has liability for		
24	25		30		Florida Statutes Yes	s 🗆 No	
	g. Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Address of New I	registered Agen	<u>t</u>
TAYLOR, DEBRA A				Street Asia	iress (P.O. Box Number is Not Acceptal	nie)	
	LAKE PLACIDO COURT N.E.				JIESS (1.5. DOX HUILDON IS THOT HOOGHUI		
ST. P	PETERSBURG FL 33703		83				
			84	City		FI 65	Zip Code
11. Pursu	ant to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	, the above r	named corpo	pration submits this statement for the pu	rpose of changing	its registered office
or reg familia	istered agent, or both, in the State of Flo ar with, and accept the obligations of, Se	ction 607.0505, Florida Statutes.	гру ше согр	Oracion's Boo	and of directors. Thereby accept the app	OIRITION AS 109IS	torog agork. Fairi
SIGNATUE	Signature, typical or printers name of registered ago	int and title it applicable (NOTE	Registered Ager	nt signature requir	red when reinstating)	DATÉ	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		
TIELE	D DEDDA A	DEFEIE	1. 1 TiTLE			☐ Cha	ange 🔲 Addition
NAME STREET ADDR	TAYLOR, DEBRA A 8424 FOURTH STREET NOF	RTH STE. N	1.2 NAME 1.3 STREET	AODRESS			
C TY-ST-74P	OT DETEROPLING FI	012. 11	1.3 STACET	· · · · · i			
THE	VS	☐ DELFIE	2 1 THLE			Cha	ange 🔲 Addition
NAME	BARDECKI, MICHAEL D 8424 FOURTH STREET NOR	ITU OTE N	22 NAME				
STHEFT ADDR	OT DETEROPLISO EL	III SIE N	2 3 STREET				
TILLE	V	DELETÉ	3 1 TITLE			Cha	ange Addition
NAME	STANLEY, DAVID	TH ATC N	3 2 NAME				
STEEL LADOR	OT DETERODIUMO FI	RIH SIE N		T ADORESS			
CHY-SI-ZIP TIFLE	OT LILIODONO IL	☐ DELÉTE	3.4 CITY - S 4. 1 TITLE	51-217		☐ Ch	ange Addition
NAME			4.2 NAME				,
STREET ADDR				ADDRESS			
Till i			4.4 CiTY - 5 5 1 TiTLE	ST-ZIP		☐ Ch	ange
NAME:			5.2 NAME			<b>—</b> —	
STREET ADDA	tess		53 STREET	ADDRESS			
C-TY-SI-ZP	,	f nr. frr	5.4 CiTY - 5	ST - ZIP		——————————————————————————————————————	ange 🗍 Addition
TITLE NAME		DELETE	6 1 TITLE 62 NAME			□ Ch	mige     Mudition
STREET ADDR	RESS			T ADDRESS			
CHY ST. 712			6.4 CITY-5				

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)(k). 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 cath; 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 changes, or on an attactor int with an address.

SIGNATURE: