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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000024633 (7)

FASTCOM MANAGEMENT, INC.

## FILED Apr 28 1997 8:00am Secretary of State

Principal Place of Business 1641 COMMERCE AVE. NORTH ST. PETERSBURG FL 33716	Mailing Address 1641 COMMERCE AVE. N ST. PETERSBURG FL 33						
				3. Date Incorporated or Qualified 03/31/1994		ate of Las 29/1996	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number			Applied For
Suite, Apt #, etc.	Suite, Apt. #, etc.		<del></del>	59-3254521			Not Applicable
Stille, Apr. #, etc.	27 Suite, Apr. #, etc.			5. Certificate of Status Desired			Additional Required
City & State	City & State	<del></del>		6. Election Campaign Financing		\$5.0	May Be
23	28	····		Trust Fund Contribution			d to Fees
Zip Country	Zip	Country	/	8. This corporation has liability for	or intangible Yes		r s. 199.032,
9. Name and Address of Cu	29 urrent Registered Agent	30		Florida Statutes  10. Name and Address of New I			
KOLENDA, JOHN F	· · · · · · · · · · · · · · · · · · ·	81	Name				
1641 COMMERCE AVE. NORTH		82	Street Addr	ress (P.O. Box Number is Not Accept	table)		
ST. PETERSBURG FL 33716			l	COS (1.0. DOX TRUMBOL IS TROCKLOOP)			
		83	1				
		84	City		F. 1	<b>85</b> Z	ip Code
			l		FL		
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SIGNATURE Signature typied or painted name of registers	obligations of, Section 607.0505. I	Florida Statute:	S.	red when reinstating)  ADDITIONS/CHANGES TO OFF	DATE		ORS IN 12
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4. I do 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 onlan attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

873 576/583 Daylime Phone #

0379397