

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 30 AM 9:47

DOCUMENT # **P94000057473 (8)**

1. Corporation Name

TECHLANDS COMMUNICATIONS CORPORATION

Principal Place of Business

1620 W. OAKLAND PARK BLVD., SUITE 203
FT. LAUDERDALE FL 33311

Mailing Address

1620 W. OAKLAND PARK BLVD., SUITE 203
FT. LAUDERDALE FL 33311

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/03/1994	3a. Date of Last Report
4. FEI Number 05-2533457	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 193.032 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. 777 S St Rd 7
22. City & State	27. Suite C
23. Zip	28. Margate, FL
24. Country	29. FL 33003 Broward

9. Name and Address of Current Registered Agent

FLINGS, INC.
3732 N.W. 18TH STREET
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

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

Signature of the officer or director of the corporation

NOTE: Registered Agent signature required when transferring

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	BRANAM, BRYAN L	1.2 NAME	
STREET ADDRESS	1620 W. OAKLAND PARK BLVD., SUITE 203	1.3 STREET ADDRESS	
CITY, ST, ZIP	FT. LAUDERDALE FL 33311	1.4 CITY, ST, ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	SCHULMAN, ROBERT E	2.2 NAME	
STREET ADDRESS	1620 W. OAKLAND PARK BLVD., SUITE 203	2.3 STREET ADDRESS	
CITY, ST, ZIP	FT. LAUDERDALE FL 33311	2.4 CITY, ST, ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	BRANAM, BARBARA	3.2 NAME	
STREET ADDRESS	1620 W. OAKLAND PARK BLVD., SUITE 203	3.3 STREET ADDRESS	
CITY, ST, ZIP	FT. LAUDERDALE FL 33311	3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 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 110.071(2)(b), 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 not at all if removed with an address.

SIGNATURE: *Barbara Brannan* **Barbara Brannan** 305-973-0209