

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
1000 N. W. 11th Street
Tallahassee, Florida 32301
Telephone: (904) 498-1234

APPROVED
AND
FILED

95 MAY -1 AM 4:29

DOCUMENT # P94000065297 (1)

1. Corporation Name

BW COMMUNICATIONS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Office Address

4332 FORREST HILL BLVD.
WEST PALM BEACH FL 33406

3. Mailed Address

4332 FORREST HILL BLVD.
WEST PALM BEACH FL 33406

4. Last Name of Agent

3. Date of Report (Month/Day/Year)
09/06/1994

3a. Date of Last Report

4. FID Number
650818080

Agreed For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contributions ☐ \$5.00 May Be
Added to Fees

7. This corporation has voluntarily not elected to use the
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
JEANETTE CAMPBELL
82 Street Address (P.O. Box Not Allowed)
4225 YSA Street G-3
83
84 City
West Palm Rch FL 85 Zip
33407

11. Pursuant to the provisions of Chapter 193, 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. See the name and address authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am
for the address and agent designated in this statement.

SIGNATURE *Jeanette A. Campbell* Jeanette A. Campbell

12. OFFICERS AND DIRECTORS

1. NAME
WARREN, BARRY
2. STREET ADDRESS
11260 N.W. 10TH MANOR
3. CITY, STATE, ZIP
CORAL SPRINGS FL 33071

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME ☐ Change ☐ Addition
2. STREET ADDRESS
3. CITY, STATE, ZIP

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14. I hereby certify that the information required with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193.02(1)(b), Florida Statutes. I further
certify that the information included in this report is a true and correct statement of the facts 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 person or persons empowered to execute this report as required by Chapter 193, Florida Statutes, and that my name
appears in Block 1, of Block 12 of this report.

SIGNATURE *Barry M. Warren* BARRY M. WARREN 4/27/95 4079652500

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR