

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000066613 (8)

1. Corporation Name

ELITE DIGITAL COMMUNICATIONS, INC.



Principal Place of Business

1515 S ORLANDO AVENUE  
SUITE A  
ORLANDO FL 32751

Mailing Address

1515 S ORLANDO AVENUE  
SUITE A  
ORLANDO FL 32751

3. Date Incorporated or Qualified  
09/12/1994

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

21 47 E. ROBINSON STREET

2a. Mailing Address

26 SAME AS PLACE OF BUSINESS

4. FEI Number

59-3266802

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. 199.032, Florida Statutes

Yes No

22 SUITE 210

23 ORLANDO - FLORIDA

24 32801

25 USA

27

28

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9. Name and Address of Current Registered Agent

CAPELLI, JOSEPH  
1515 S ORLANDO AVENUE  
SUITE A  
ORLANDO FL 32751

10. Name and Address of New Registered Agent

81 Name TOM BURDICK  
82 Street Address (P.O. Box Number is Not Acceptable)  
47 E. ROBINSON STREET, SUITE 210  
83  
84 City ORLANDO FL 85 Zip Code 32801

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 typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

TOM BURDICK - May 1st/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
CD	DINKLAGE, KEN	620 E. COLONIAL DR., BOX 833709	ORLANDO FL	<input type="checkbox"/>
CD	FANELLI, JIM	3600 NW 82ND AVENUE	MIAMI FL	<input checked="" type="checkbox"/>
SCD	HUNTER, CLAUDE	620 E. COLONIAL DR., BOX 531166	ORLANDO FL	<input type="checkbox"/>
CD	INOCHOVSKY, ROMAN	132 POWELL BLVD., #9307	DAYTONA BEACH FL	<input checked="" type="checkbox"/>
PD	CAPELLI, JOE	908 RIVERBEND BLVD	LONGWOOD FL	<input checked="" type="checkbox"/>
CD	COUALLIER, CHRISTOPHE	849 S WYMORE RD, 26 A	ALTAMONTE SPRINGS FL	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1 TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. DELETE
KEN DINKLAGE				<input type="checkbox"/>
PD	TOM BURDICK	47 E. ROBINSON STREET, SUITE 210	ORLANDO, FL 32801	<input checked="" type="checkbox"/>
VP/D/T	DON REYNOLDS	1014 WATERCOURT	ORLANDO, FL 32804	<input checked="" type="checkbox"/>
B	BILL COLEMAN	2942 LAKE PINELAND BLVD.	ORLANDO, FL 32806	<input checked="" type="checkbox"/>
D	SCOT SMOTHERMAN	128 WISTERIA AVENUE	ORLANDO, FL 32806	<input checked="" type="checkbox"/>

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 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.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-839-5511

Daytime Phone #

CR2E034 (12/95)