

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 18 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000066613 (8)**

1. Corporation Name

**ELITE DIGITAL COMMUNICATIONS, INC.**

Principal Place of Business

**47 E ROBINSON STREET  
SUITE 210  
ORLANDO FL 32801  
US**

Mailing Address

**47 E ROBINSON STREET  
SUITE 210  
ORLANDO FL 32801  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**09/12/1994**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

**21 1850 Lee Rd.**

Suite, Apt. #, etc.

**22 Suite 115**

City & State

**23 Winter Park FL**

Zip

**24 32789**

Country

**25 USA**

2a. Mailing Address

**26 1850 Lee Rd.**

Suite, Apt. #, etc.

**27 Suite 115**

City & State

**28 Winter Park FL**

Zip

**29 32789**

Country

**30 USA**

9. Name and Address of Current Registered Agent

**BURDICK, TOM  
47 EAST ROBINSON ST  
SUITE 210  
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

81 Name

**BURDICK, TOM**

82

Street Address (P.O. Box Number is Not Acceptable)

**1850 LEE RD.**

83

**SUITE 115**

84

City

**WINTER PARK**

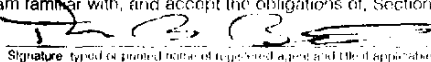
FL

85 Zip Code

**32789**

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



(NOTE: Registered Agent signature required when reinstating)

DATE

**4/30/98**

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**D  
NAME DINKLAGE, KEN  
STREET ADDRESS 620 E. COLONIAL DR., BOX 833709  
CITY-ST-ZIP ORLANDO FL**

TITLE ☐ DELETE

**PD  
NAME BURDICK, TOM  
STREET ADDRESS 47 E ROBINSON ST, SUITE 210  
CITY-ST-ZIP ORLANDO FL**

TITLE ☐ DELETE

**SD  
NAME HUNTER, CLAUDE  
STREET ADDRESS 620 E. COLONIAL DR., BOX 531166  
CITY-ST-ZIP ORLANDO FL**

TITLE ☐ DELETE

**DT  
NAME REYNOLDS, DON  
STREET ADDRESS 1016 WATER COURT  
CITY-ST-ZIP ORLANDO FL**

TITLE ☐ DELETE

**D  
NAME SMOTHERTON, SCOT  
STREET ADDRESS 618 CHEROKEE CIR  
CITY-ST-ZIP ORLANDO FL**

TITLE ☐ DELETE

**D  
NAME INOCHOVSKY, ROMAN  
STREET ADDRESS 1535 FARRINDON CIR  
CITY-ST-ZIP HEATHROW FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 on an attachment with an address.

SIGNATURE 

CP2E034 (10/97)