

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
JENNIFER M. WHELAN
TALLAHASSEE, FLORIDA 32399-0001
(904) 412-2000

APPROVED
AND
FILED

MAY 18 11:10:15

STATE OF FLORIDA
TALLAHASSEE

DOCUMENT # P94000089141 (3)

1. Corporation Name

APPLIED COMMUNICATIONS TEAM, INC.

2. Principal Office Address

5969 GOLDEN EAGLE CIRCLE
PALM BEACH GARDENS FL 33418

3. Mailing Address

5969 GOLDEN EAGLE CIRCLE
PALM BEACH GARDENS FL 33418

4. Write in this space

3. Date of Report
12/08/1994

3a. Date of Last Report

2. Principal Office of Reporting

21. 2300 PALM BEACH LAKES BLVD

2b. Mailing Address

26. 424 FLOTILLA RD.

22. State of Inc.

FL

27. State of Inc.

FL

4. FIC Number

65-0551110

Applied For
Last Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23. City & State

WEST PALM BEACH

28. City & State

NORTH PALM BEACH, FL 33408

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24. FIC Number

33404

25. FIC Number

33404

29. FIC Number

33404

30. FIC Number

33404

8. This corporation has liability for intangible tax under S. 190.012
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ARCE, MARIA R
5969 GOLDEN EAGLE CIRCLE
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81. Name ARCE, MARIA - R

82. Street Address (P.O. Box Number is Not Acceptable)
424 FLOTILLA RD

83. City & State

84. City NORTH PALM BEACH, FL

85. FIC Number

33408

11. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am the duly authorized representative of the corporation named herein.

SIGNATURE: *MARIA R ARCE* ARCE MARIA - R 5/14/95

12. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am the duly authorized representative of the corporation named herein.

13. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am the duly authorized representative of the corporation named herein.

14. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am the duly authorized representative of the corporation named herein.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/14/95 541-2708