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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P95000021162 (9)

R.B.W. COMMUNICATIONS INC.

Mailing Address Principal Place of Business 17830 MELLEN LANE 17830 MELLEN LANE JUPITER FL 33478-4840 JUPITER FL 33478 3. Date Incorporated or Qualified 3a. Date of Last Report 03/14/1995 06/25/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0568300 Not Applicable \$8.75 Additional Suite Apt #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Zio Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WADE, RONALD B 17830 MELLEN LANE 62 Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33478 83 Zip Code 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 Significate hypothor printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition Change THLE DELETE 1.1 TITLE WADE, RONALD B 1.2 NAME NAME % 17830 MELLEN LANE STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 33478 1.4 CiTY-ST-ZIP CITY - ST - ZIP Addition Change DELETE TITLE 2.1 TITLE 2.2 NAME NAM! 2.3 STREET ADDRESS STREET ACORESS 2. 4 CITY - ST- ZIP CHY+ST-2P Addition DELETE ☐ Change Tille 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY - ST - ZIP C(1Y+S1+2)F DELETE \_\_\_ Addition 4.1 TITLE 4. 2 NAME NAM! 4.3 STREET ADDRESS STREET ADDRESS 44 CiTY-ST-ZIP CITY-ST-7:P Change Addition DELETE 51 TITLE THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition THE 6.2 NAME NAME

**6.3 STREET ADDRESS** 

14. I do 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

SIGNATURE: KOWLD DUDGE REHALLIB. W

appears in Block 12 or Block 13 if changed, or on an attachment with an address

STREET ADDRESS

4-22-97

FILED

May 02 1997 8:00am

Secretary of State

561-746-8359

(96/6)