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PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jun 11 1998 8:00am Secretary of State

1		# P950 MUNICATIONS ()					
Principal Plac	e of Busines	35	Mailin	ng Address			-	Bo leh Bo reb i		
3802 NE 207	TH ST		3802	NE 207TH ST						
STE 603	_		STE							
AVENTRUA FL 33180				AVENTURA FL 33180 US			DO NOT WRITE IN THIS SPACE			
08			US				3. Date Incorporated or Qualified			
2. Principal P	Place of Rusi	MOSS	2a M:	ailing Address	·		03/31/1995 4. FEI Number			
	21			26			65-0569540			oplied For ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					\$8.75	, ,
22			27	⊢ −1			5. Certificate of Status Desired		Fee Re	
City & State				City & State			6. Election Campaign Financing		\$5.00	
23		·	28				Trust Fund Contribution		Added	
Zip		Country	Z)¢	0	Country		8. This corporation owes or has p	aid the c	urrent year Int	angible
24		25	29		30		Personal Property Tax due Jun	e 30.	Yes [No
		and Address of Cur	rrent Registere	ed Agent			10. Name and Address of New R	egistered	d Agent	
	MM erm an,				81 Na	me S	hari Buffa			
3802 NE 207TH ST					82 Str	eet Addre	ss (P.O. Box Number is Not Accepta	able)		
STE 603							02 NE 207 th's	<u>a i </u>		
AV AV	ENTURA F	L 33180			83	<u>S</u> .	tE 603			
	-				84 Cit	у			85 Zip (Code
44 0	4. 15.					- 		Fl	_ '	
office or r agent I a	regi ste red aç ım fami liar	gons of Sections 607.6 gons of bath, in the St in, and alocept the of	usuz and 607.1 late of Florida bligations of, So	isus, Florida Statu Such change was ection 607,0505, Fl	ies, the above-har authorized by the orida Statules.	ned corpo corporatio	oration submits this statement for the on's board of directors. I hereby acce	purpose optithe ap	of changing its opointment as	s registered registered
SIGNATURE		Mry	Shall	BUTTA	V			6-	1~7 X	
12.	Signature, lyped	For punted harve js r ejistered	tagent and tille it app							
		OFLICERS			L Registered Agent sign	sature required		DATE OF AN	ID DIDECTOR	0.411.40
THTLE	<u> </u>	OF ICERS.	AND DIRECTO	HS	13.		ADDITIONS/CHANGES TO OFFI	CERS AN		
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NAME	B UFFA,	ROBERT J	AND DIBLECTO	HS	13. 1.1 TITLE 1.2 NAME	P/:	ADDITIONS/CHANGES TO OFFI	CERS AN		
NAME Street address	B UFFA, % 3530	ROBERT J MYSTIC POINTE [AND DIBLECTO	HS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE	P/:	ADDITIONS/CHANGES TO OFFI	CERS AN		
NAME	B UFFA, % 3530	ROBERT J	AND DIBLECTO	HS	13. 1.1 TITLE 1.2 NAME	P/:	ADDITIONS/CHANGES TO OFFI	CERS AN	Change	
NAME Street address City+St+Zip	B UFFA, % 3530 AVENTL V	ROBERT J MYSTIC POINTE D JRA FL 33180	AND DIBLECTO	TES DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADORE 1.4 CITY - ST-ZIP	P/s	ADDITIONS/CHANGES TO OFFI	CERS AN		Addition
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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.