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



CORP ANNUA	ORATION LL REPORT	Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS				
DOCUM 1. Corporation N UNIVER	ENT # P950 SAL COMMUNICATION	0002 <b>79</b> 7 NS TECHNOLOG	• •			
Principal Place of Business Mailing Address  10421 ST. AUGUSTINE ROAD  JACKSONVILLE FL 32257 JACKSONVILLE FL 32257					3. Date Incorporated or Qualified 3a. Date of Last Report 04/07/1995	
2. Principal Place		2a. Mailing A	Address		4. FEI Number 59 – 3313081	Applied For Not Applicable \$8.75 Additional
City & State		27   City & S			Certificate of Status Desired     Bection Campaign Financing     Trust Fund Contribution	Fee Required  \$5.00 May Be Added to Fees
Zyp 24	Country 25 9 Name and Address of C	Zip 29	30 ent	Country		r intangibie tax under s 199.032, ps
SAFER, ELIOT J 3974 WOODCOCK DRIVE SUITE 100 JACKSONVILLE FL 32207  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute or restrictional populary to both in the Statut of Florida. Such change was authorized				82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL  85 Zip Code  8, the above named corporation submits this statement for the purpose of changing its registered office do by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam		
familiär with SIGNATURE	guide type or providence of name of	, Section 607.0505, Flo	rida Statutes	ogretered Agent sujeut we rece	നാ. ജി.ജ. അത് പ്രത്യ	J.A.T.Ł
12.		IS AND DIRECTORS		13.	ADDITIONS/CHANGES TO O	FFICERS AND A RECTORS IN 12
TITLE NAME STREET ADDRESS	D DELFTE SCHUSTER, BARRY 10421 ST. AUGUSTINE ROAD JACKSONVILLE FL 32257			1 1 THLE 12 NAME 13 STREET ADDRISS 14 CITY - ST-ZPP	f/s/D	Change
TITLE NAME STREET ADDRESS	DACROCHVILLE IE 322		DELETE	2 1 TURE 22 NAME 23 STREET ADDRESS		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	☐ DELETE			2 4 C TY - ST - ZIP 3 1 TITLE 3 2 NAME 3 3 STREET AODRESS		Charge Addition
TITLE NAME STREET ADDRESS		Г	] DETELE	3 4 CHY-S1-ZIP 4. 1 THE 4 2 NAME 4 3 STREET ADDRESS		Change Addition
CITY - ST - ZIP  TITLE  NAME  STREET ADDRESS		Ē	) DELETE	5 1 TITLE 5 2 NAME 5 3 STREE! ACOPESS	9000018 -05/06/960 ***200,00	
CITY - ST - ZIP TITLE			] DELETÉ	5 4 CITY - ST - ZIP 6 1 TITLE		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this fling 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 ooth, 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 attach nent with an address.

6 2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

NAME

STREET ADDRESS

Some Schuster BARD SCHUSTER

April 2, 1946 (901) 268 - 0241