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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1996		Secretary of State, ON OF CORPORATIONS		
1. Corporation	TVEITE	000048420	(0)		
ASLAN	COMMUNICATIONS, IN	IC.		E HAR HAR E DIA HATAF ATHE AATH AAR	II a b ahi ba hi a kac i abah akac kaci
Principal Place	of Business	Mailing Address		<u> </u>	
925 S.W. 94 AVENUE		925 S.W. 94 AVENUE			
MIAMI FL 331	174	MIAMI FL 33174	1		
				3. Date Incorporated or Qualified 06/21/1995	3a. Date of Last Report
2. Principal Pla	ce of Business	2a. Mailing Addres	An a	4. FEI Number 65-05897-26	Applied For
2520 Sw 22nd St Suite, Apt #, etc.		Suite, Apri. #, etc.			Not Applicable \$8.75 Additional
22 Junt 6	1:2	27		5. Certificate of Status Desired	Fee Required
City & State 23 Miani	. 1-1	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zin 24 33/4	Country 25 USA	Zip	Country	B. This corporation has liability for	intangible tax under s 199.032,
24 23/4	9. Name and Address of Cu	29 rrent Registered Agent	30	Florida Statutes Yes 10. Name and Address of New F	□ No legistered Agent
			81 Name	HAN CHIMUMAS	,
RODRIGUEZ, EUGENIO A 82			82 Street Add	fress (P.O. Box Number is Not Acceptab	ole)
<u> </u>	'. 04 AVENUE 1-23174-		83	-0 SW 22 7 57	<u> </u>
	2 0011 7		84 City	ite 2	B5 Zip Code
Tagina di Nasaria	40-2-00-00-00-00-00-00-00-00-00-00-00-00-	V500	" M ₁	PA M / pration submits this statement for the pur purd of directors. I hereby accept the app	- FL 33147
SIGNATURE S	OM COM THE Sprace, types or protect name of regioned a OFFICERS	AND DIVICTORS	(NOTE: Registered Agent signature renum	ed when reinstating) ADDITIONS/CHANGES TO OFF	
THLF	DODOICHEZ EUCENIO A	☐ DELET	E 1 1 TITLE 12 NAME		Change
SPREET ADDRESS	RODRIGUEZ, EUGENIO A -925-S.W94 AVENUE	•		25205W227 3	7 soile 2
C(TY-S1-Z)F	MAMI FL 33174	ET DELET	1.4 CHY-ST-ZIP	MIAMI, FL 331	41
TITLE NAME	d Rodriguez, ana M	DEL ET	2 1 TITLE 22 NAME		Change Addition
STREET ADDRESS	925 S.W. 94 AVENUE			2520 SW 22 4 57	
GHY-SI-7-P TILLE	MIAMI FL 33174~	DELET	2 4 CITY - ST - ZIP	MIAMI, FL 3	31 K4
NAME			3 1 TITLE 3 2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
TITLE		☐ DELET	3.4 C/TY-ST-Z/P E 4 1 T/TLE		Change Addition
NAME			4.2 NAME		C Survey
STREET ADDRESS			4.3 STREET ADDRESS	30000173	39709
CITY - ST - ZIP TITLE		DELET	4.4 CITY - ST - ZIP 5.1 TITLE	3000017: -03/06/96010 ***225.00	026—019 Addition
NAME			52 NAME	▼▼▼ととち。 ひじ	had arrange
STREET ADDRESS			5 3 STREET ADDRESS		
CHY-SI-ZIP TILE		DELET	5 4 CITY-\$1-ZIP 6 1 TITLE		☐ Change ☐ Addition
NAME		•	6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
14. I do hereby	certify that the information supplies	ed with this filing is voluntari	64 CHY-ST-ZP ly furnished and does not qualify to	for the exemption stated in Section 110	07(3)(k). Florida Statutas, Hurthor
NAME STREET ADDRESS CITY-ST-ZIP 14. I do horeby certify that to oath; that I	the information indicated on this a	ed with this filing is voluntar annual report or supplement oppration or the receiver or	62 NAME 63 STREFT ADDRESS 64 CHY-SI-ZIP by furnished and does not qualify to an annual report is true and accuratively employeed to execute the	for the exemption stated in Section 119, ate and that my signature shall have the is report as required by Chapter 607, Fk	07(3)ik), Florida Statutes. I further

SIGNATURE;

1 39/96 305-285-18/A