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

PROFIT



FLORIDA DEPARTMENT OF STATE

	rporation iual report 1996	Secrel	S. Morthain ary of State CORPORATIONS		
DOCU 1. Corporati	JMENT # P9	5000078485 (6	S)		
R. &	D. COMMUNICATIONS	, INC.		T HORMAN ME HAND COME COME COME COME	AK OOMU UURU IOHIN OHDEI NIIDI OIII IRAI
Principal Plac	ce of Business	Mailing Address			
	27 TERRACE FROALE FL 33312	5184 S.W. 27 TERRAC FT. LAUDERDALE FL			
<u></u>				3. Date Incorporated or Qualified 3 10/09/1995	a. Date of Last Report
2. Principal F	Place of Business	2a. Mailing Address 26		4. FEt Number	Applied For
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		65-061300	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Bo
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for intar Florida Statutes	
	9. Name and Address of	Current Registered Agent		10. Name and Address of New Regi	stered Agent
DENNI	S DONALD		81 Name		
DENNIS, DONALD 5184 S.W. 27 TERRACE			82 Street Ad	Address (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33312			83		
			B4 City		
44 5			1 1 ' '		FL 85 Zip Code
or registe	to the provisions of Sections 60 gred agent, or both, in the State of	7.0502 and 607.1508, Florida Statute of Florida. Such change was authorize	s, the above named corp ed by the corporation's be	poration submits this statement for the purposi oard of directors. I hereby accept the appointm	e of changing its registered office
SIGNATURE	rith, and accept the obligations o	f. Section 607.0505, Florida Statutes.	-		none do registered agent, i am
	Signature typed or printed name of register		E. Flugistered Agent signature req.	med when renetating)	DATE
12. TITLE	OFFICEI	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12
NAME	1,5	_ J DELETE	1 1 TITLE		Change Addition
STREET ADDRESS	JOHN MOX	Borough hur 5t. FC 33020	1.2 NAME		
CITY-ST-ZIP	Wall man	nur 5t.	1.3 STREET ADDRESS		
TITLE	11P T	DELETE	2 1 TITLE		Channe Clader
NAME	Disala R		2.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	5184 500 2	in Terr,	2 3 STREET ADDRESS		
CITY - ST - ZIP	Ft. LAU	DENNIS LI TERR DENDALUFT. 33312	2 4 CITY-ST-ZIP		
Tille		DECETE	3 1 TIFLE		☐ Change ☐ Addition
NAME STREET ADDRESS			3.2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELETE	4 1 TITLE		
NAME			4.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELE1E	5 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - ST - ZIP		Florer	5.4 CITY - SE - ZIP	900001779	2209_
NAME		☐ DELETE	6 1 TITLE 1	-04/12/9601082	086 hange Addition
STREET ADDRESS			62 NAME ,		

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exeruption 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 oath, that I am an officer or director of the corporation. 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 a lattachment with an address.

6.3 STREE! ADDRESS

6.4 CITY - ST - 7/P

SIGNATURE:

CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR