

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

**FILED**  
**May 20 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000079458 (2)**  
 1. Corporation Name  
**EVERGLADES COMMUNICATION CENTER, INC.**



Principal Place of Business <b>1461-A S.E. 17TH STREET                  FORT LAUDERDALE FL 33316</b>	Mailing Address <b>1461-A S.E. 17TH STREET                  FORT LAUDERDALE FL 33316</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>1461-A S.E. 17th St.</b> Suite, Apt. #, etc. 22		2a. Mailing Address 26 <b>1461-A S.E. 17th St.</b> Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified <b>10/16/1995</b>	
23 <b>Fl. Lauderdale Fl.</b> City & State 24 <b>33316</b> Zip 25 <b>Broward</b> Country		28 <b>Fl. Lauderdale Fl.</b> City & State 29 <b>33316</b> Zip 30 <b>Broward</b> Country		4. FEI Number <b>65-0609274</b> Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
~~BARRETTO, ROGELIA  
 1461-A SE 47TH ST.  
 FT. LAUDERDALE FL 33316~~

10. Name and Address of New Registered Agent  
 81 Name **Arnel Sarmiento**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**1461-A SE 17th St.**  
 83  
 84 City **Fl. Lauderdale** **FL** 85 Zip Code **33316**

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 *Arnel Sarmiento* (NOTE: Registered Agent Signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE <b>PD</b>	<input type="checkbox"/> DELETE
NAME <b>PASCUAL, MERLITA</b>	
STREET ADDRESS <b>1461-A S.E. 17TH STREET</b>	
CITY-ST-ZIP <b>FORT LAUDERDALE FL 33306</b>	
TITLE <b>TD</b>	<input type="checkbox"/> DELETE
NAME <b>NITULLANO, NENA</b>	
STREET ADDRESS <b>1461-A S.E. 17TH STREET</b>	
CITY-ST-ZIP <b>FORT LAUDERDALE FL 33316</b>	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <b>President</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME <b>Pascual, Merlita</b>	
1.3 STREET ADDRESS <b>1461-A SE 17th Street</b>	
1.4 CITY-ST-ZIP <b>Fl. Lauderdale Fl. 33316</b>	
2.1 TITLE <b>Secretary</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME <b>Nitullano, Nena</b>	
2.3 STREET ADDRESS <b>1461-A S.E. 17th Street</b>	
2.4 CITY-ST-ZIP <b>Fort Lauderdale Fl. 33316</b>	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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.

SIGNATURE *Merlita Pascual* *Arnel Sarmiento* *Arnel Sarmiento*

CR2E034 (10/97)