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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P95000088372 (4)

DOCUMENT #
1. Corporation Name FLORIDA TELECOMMUNICATIONS AND RADIO SERVICES IN

Mailing Address Principal Place of Business



WINTER HAY	2 WEST /EN FL 33388-1	SUITE 1	y 92 west Haven FL 333	88-1		3. Date Incorporated or Qualifie	d 3a. Date o	f Last Re	port	
2. Principal Plac	ce of Business	2a. Mailing A	ddress			4. FEI Number IA 22	11 01 9	A	pplied For	
2. Francipar Fiak	OB OF BOSINGOS	26				4. FEI NOTILES 59 33	14 9672	ر N	ot Applicable	
Suite, Apt. #	, etc.	Suite, Ap	#, €tc.			5. Certificate of Status Desired			Additional equired	
City & State		City & Ste	nte			Election Campaign Financing Trust Fund Contribution	, D		May Be to Fees	
Zip	Country 25	Zip				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No				
24		of Current Registered Age				10. Name and Address of Ne	w Registered A	gent		
	8. Hame and Real Co.			81	Name					
CARUS	O, JOSEPH M JR			82	Ctroot Addr	ress (P.O. Box Number is Not Accep	ntable)			
105 N	EOLA BLVD		83		Street Audi	Sured Modless (F.O. Box No Hoch to The Cheephare)				
NO. 4 Orlan	IDO FL 32801							85 Zıp	Code	
					City	oration submits this statement for the ard of directors. I hereby accept the	FL			
familiar with	h, and accept the obligation	ins of, Section 607.0005, Fior	nda Statutes.	Fingistered Age		ed when reinstalings ADDITIONS/CHANGES TO	DATE			
12.	OF F	TICERS AND DIRECTORS		13.		ADDITIONS/OF ANGLO TO		Change	Maddilion	
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NAME	CARUSO, JOSEPH			1.2 NAME						
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CITY-ST-ZIP		WI	Dr. F.F.	1.4 CHY-] Change	Addition	
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certify that the information supplied vital this limit is voluntarily furnished and uces not quality for the extemplion stated in decidin 118-07/3/kg, notice statutes, notified 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 tchanged, or on an attachment with an address.

Vice President

AME OF SIGNING OFFICER OR DIRECTOR

19 April 96 941 956 1281