

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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000088372 (4)

1. Corporation Name

FLORIDA TELECOMMUNICATIONS AND RADIO SERVICES IN
C.



Principal Place of Business

Mailing Address

351 CYPRESS GARDENS BLVD
WINTER HAVEN FL 33880
US

105 N EOLA BLVD
SUITE 4
ORLANDO FL 32801
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

33880

30

POLK

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARUSO, JOSEPH M JR
105 N EOLA BLVD
NO. 4
ORLANDO FL 32801

81

Name

JOSEPH M. ESPOSITO

82

Street Address (P.O. Box Number is Not Acceptable)

351 CYPRESS GARDENS BLVD.

83

84

City

WINTER HAVEN

FL

85

Zip Code

33880

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 JOSEPH M. ESPOSITO, PRESIDENT

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-27-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DVPT ☒ DELETE
NAME CARUSO, JOSEPH M JR
STREET ADDRESS 105 N. EOLA BLVD NO 4
CITY-ST-ZIP ORLANDO FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE DP ☐ DELETE
NAME ESPOSITO, JOSEPH M
STREET ADDRESS 2219 PALMVIEW CIRCLE
CITY-ST-ZIP AUBURNDAL FL 33823

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VPS ☐ DELETE
NAME ESPOSITO, DEBORAH A
STREET ADDRESS 105 N EOLA BLVD, SUITE 4
CITY-ST-ZIP ORLANDO FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☒ Change ☐ Addition

106 BLOOD HOUND TRAIL
AUBURNDALE, FL 33823

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

CR2E034 (10/97)