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

PROFIT CORPORATION ANNUAL REPORT



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

1996 DOCUMENT #

P95000091655 (7)

WEBB	COMMUNICATION SERVICE	ES, INC.							
Principal Place of Business Mailing Address 6211 N.W. 65TH TERRACE 6211 N.W. 65TH TERRACE PARKLAND FL 33067 PARKLAND FL 330						I 100111001 179 10101 01111 00111 00	III QQIII EUIIB IUIU	I ANATO BITOS OFFICE UNIT TOUR	
						3. Date Incorporated or Qualified 11/27/1995	3a. Date of	Last Report	
2. Principal Pla	ce o' Business	2a. Mailing Address 26			4. FEI Number 65 - 0622 695	-	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	_ \$	8.75 Additional Fee Required		
Crty & State		City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
<i>Ζ</i> ιρ 24	Country 25	Zip 29	Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes 🖸 No			
L	g. Name and Address of Current	Registered Ager	nt			10, Name and Address of New R	egistered Age	ent	
WEBB, JOHN L 6211 N.W. 65TH TERRACE PARKLAND FL 33067					Name Street Addre	ess (P.O. Box Number is Not Acceptable)			
				84	City		FL ⁸	85 Zip Code	
familiär with SIGNATURE	n, and accept the obligations of, Sections Signal to Typed or printed name of registered agent a OFFICERS AND	on 607.0505, Florid and title if applicable.	la Statutes.		t signature required	d of directors, I hereby accept the applications of the depth of the d	DATE		
TITLE NAME STREET ADDRESS CITY+ST-ZIP	D Webb, John L 6211 n.w. 65th Terrace Parkland Fl 33067		ELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP				Change [] Addition	
TITLE NAME STREET ADORESS CITY - ST- ZIP	D WEBB, LINDA C 6211 N.W. 65TH TERRACE PARKLAND FL 33067		ELETE	2 1 TITLE 2.2 NAME 2.3 STREET 2.4 CHTY-S				Change	
TITLE NAME STREET ADDRESS CHY-SI-ZIP			DELETE	3 1 TITLE 32 NAME 33 STREET 34 CITY-S	ADDRESS			Change Addition	
TITLE NAME STREET ADORESS CITY-S1-ZiP		ا ا	DELETE	4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S	ADORESS			Change Addition	
TITLE NAME STREET ADDRESS			DELETE	5.1 TITLE 5.2 NAME 5.3 STREET	ADDRESS			Change 🔲 Addition	
THUF NAME STREET ADDRESS CITY ST. ZIP			DELETE	5.4 CHY-S 6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CHY-S	ADDRESS		<u> </u>	Change Addition	
				hed and doe	s not qualify for	or the exemption stated in Section 119 te and that my signature shall have the s report as required by Chapter 607, Fi			

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/96 305-345-2760

R2E034 (12/9