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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 10 1998 8:00am Secretary of State

DOCU 1. Corporation LEX-N		# P9600 COMMUNICATIONS		305 (1)							
Principal Place of Business				Mailing Address					4 19611981 (IR SPIRE BILLI BOLII BE		400 11400 11111 80	IOT UTAL 1004
6261 NORTHWEST 6 WAY				6261 NORTHWEST 6 WAY								
SUITE 203				SUITE 203								
FORT LAUDERDALE FL 33309				FORT LAUDERDALE FL 33309				1		RITE IN THIS	SPACE	·
									 Date Incorporated or Qualif 03/14/1996 	ed		
2. Principal I	Place of Busi	2a. Mail	2a. Mailing Address					4. FEI Number		Ar	oplied For	
21		26						65-0657150			ot Applicable	
Suite, Apt	. #, ⊕tC.		Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional	
City & Sta	to.		City & State								polited	
23		28	28					Election Campaign Financin Trust Fund Contribution	° 🗆	\$5.00 Added I	May Be to Fees	
Zip		Country	Zip		<u> </u>	untry	1		6. This corporation owes or ha	•		
24	6 Nemo	25 and Address of Currer	29	Acent	30	1			Personal Property Tax due a 10. Name and Address of Nev			J No
			ir negistered	Agent		81	Name		IV. Manie and Address of Nev	Ledisteled	Agent	
EPSTEIN, RICHARD W												
100 WEST CYPRESS CREEK ROAD STE 100						82 Street Addr			(P.O. Box Number is Not Acce	ptable)		
FORT LAUDERDALE FL 33309						B3				· · · · · · · · · · · · · · · · · · ·		
, ,	JIII CAODE	HDALL I L 00003				L						
						84	City			FL	85 Zip (Code
11. Pursuant	to the provis	ions of Sections 607.050	2 and 607.15	08, Florida Stati	ites, the a	bov	l e-named d	corpora	tion submits this statement for t		= of changing it	s registered
office or a	regi ste red ag am f a miliar w	gent, or both, in the State ith, and accept the obliga-	of Florida. Su ations of Sec	ich change was tion 607 0505 F	authorize	d by	y the corp	ooration'	tion submits this statement for t s board of directors. I hereby a	ccept the ap	pointment as	registered
SIGNATURE		and according to a configuration			101100		.					ĺ
	Signature, typed	or printed name of registered agr				d Age	ent signature r	required w	then reinstating)	DATE		
12.	PSTD	OFFICERS AN	D DIRECTOR	· · · · · · · · · · · · · · · · · · ·			13.		ADDITIONS/CHANGES TO O	FFICERS AN		
TITLE	1 ,	DONALD.		DELETE	1.1 7		- 1				L Change	☐ Addition
NAME	LIFTON, RONALD DRESS 6261 NORTHWEST 6 WAY, SU			12 N								
STREET ADDRESS	CODT LAUDEDDALC CI						ADDRESS					
CITY-ST-ZIP TITLE	CD	NODE TE		DELETE	1.4 C 2 1 T		T-ZIP				Change	Addition
NAME		L, JEROME			2.2 N		ļ				□ Change	☐ Modifion
STREET ADDRESS		W 6TH WAY STE 203					ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE FL											
TITLE	VD			DELETE	3.1 T		ST-ZIP			•	☐ Change	Addition
NAME	ATHEN,	JOAN			3.2 N							
STREET ADDRESS	6261 N	W 6TH WAY STE 203					ADDRESS					
CITY-ST-ZIP	FORT L	AUDERDALE FL					ST-ZIP					
TITLE				DELETE	4.1 TI		-				Change	Addition
NAME					4.21	IAME						
STREET ADDRESS					4.3 S	TREET	ADDRESS					
CITY-ST-ZIP					4.4 C	TY-S	T- ZIP					
TITLE			******	DELET E	5.1 Ti						Change	Addition
NAME					5.2 N	AME						1
STREET ADDRESS					5.3 S	TREET	ADDRESS					
CITY-ST-ZIP			·		5.4 CI	1Y-5	T-ZIP					
TITLE				☐ DELET E	6.1 TI	TLE					Change	Addition
NAME					6.2 N	AME	}					
STREET ADDRESS				•	6.3 S1	REET	ADDRESS					į.
CITY-ST-ZIP					6.4 CI	TY-S	T-ZIP					ļ

14. Thereby 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 suppliemental 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, it on an attachment with an address.

98