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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

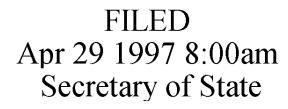
Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000037102 (6)

S N K COMMUNICATIONS, INC.

Principal Place of Busino	88
17000 MANNERS CIRCLE	

Mailing Address





17039 WANNERS CIRCLE ODESSA FL 33556			17039 W ODE 88 A	NNERS CIRCLE FL 33556-1829					
							3. Date Incorporated or Qualified 04/25/1996	3a. Date of Las	st Fleport
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For	
21 10014 N. Date Mabry 26 Same					59-33740		Not Applicable		
Sulte, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired				
City & State City & State						6. Election Campaign Financing \$5.00 May Be			
23 TAMPA				Count	rv	Trust Fund Contribution Added to Fees			
				30	8. This corporation has liability for intangible tax under ε. 199.032, Florida Statutes			or s. 199.032,	
	9. Name and A	ddress of Curre		Agent			10. Name and Address of New F		
BEN	NTLEY, JENNIFER	4		4	8	1 Name -	Jennifer Bent	101	
	39 WINNERS CI	RCLE			8	2 Street Add	dress (P.O. Box Number is Not Accept	able	
ODI	ESSA FL 33556					10	2014 N. DALE M	Abru Su	ا اه اهار
					8	3		7	
					8	4 City	~ ^ ~	—. 85 7	rip Code
44 6						1 1	AMPA		33618
office or r	to the provisions of regis t ered agent, of	r Sections 607.05 r both, in the S iei	02 and 607.150 e of Florida. Suc	8, Florida Statute ch change was a	es, the abo authorized I	ve-named cor by the corpora	rporation submits this statement for the	purpose of changin	g its registered
agent. I a	prifamiliar with, aylo	accels the obl	jations of Socti	on 607.0505, Flo	rida Statut	es.	ation's board of directors. I hereby acc	1/1-10	7.4
SIGNATURE (Stone ure, lyped or Vinto	o nany of registert o a	WUUUY	N. Tayon				4//5/9	/
12.	30,000,19,000 01,1100		ND DIRECTORS	ine (NOTE	13.	geni signature reqi	uirod whon reinstating) ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	OES IVI 13
TITLE	I/DP			DELETE	1.1 TITLE		nooniono, on maco 10 on	Chang	
NAME	BENTLEY, HE	rschel g			1.2 NAMI			-	,
STREET ADDRESS	17039 WINNE				1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ODESSA FL 3	3556			1.4 CiTY	SI-ZIP			
TITLE	DST			DELETE	2 1 1IILE			Chang	ge 🔲 Addition
NAME	BENTLEY, JEN				2.2 NAME	:			
STREET ADDRESS	17039 WINNE				2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ODESSA FL 3	3556		**************************************	2. 4 CITY		**************************************		
TITLE				DELETE	3.1 TITLE			Chang	ge L Addition
NAME OTOTET ADDOCOD					3.2 NAM8				
STREET ADDRESS CITY-ST-ZIP					1	ET ADDRESS			
TITLE				DELETE	3.4. City 4.1 Title			Chang	ge Addition
NAME					4. 2 NAM			L. J. Onling	No ET VOUIDIN
STREET ADDRESS						ET ADDRESS			1
CITY-ST-ZIP					4.4 CH Y				
TITLE				DELETE	5.1 TITLE			Chang	ge Addition
NAME					5.2 NAME				
STREET ADDRESS					5.3 STREE	ET ADDRESS			ŀ
CITY-ST-ZIP					5.4 CITY-	ST-ZIP			
TITLE				DELETE	6.1 TITLE			Chang	ge 🔲 Addition
NAME					6.2 NAME				ŀ
STREET ADDRESS					6.3 STREI	T ADDRESS			
CITY-ST-ZIP	hy codify that the i-	formation asset	nel might shift 40°	. ela a a a a 112	6.4 CHY-	ST-ZIP	11.0		
intormatio	on indicated on this	annual report or the corporation r	supplemental a	nnual report is tr	ue and acc	turate and tha	ed in Section 119.07(3)(1), Florida Statut al my signature shall have the same leg ort as required by Chapter 607, Florida	abem li se taollo ler	under eath: that