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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998DOCUMENT #

P96000042517 (8)

INTERCOM COMMUNICATIONS, INC.

FILED Apr 29 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 7081 GRAND NATIONAL DR 7081 GRAND NATIONAL DR ORLANDO FL 32892 ORLANDO FL 32892 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 7081 Grand National Dr 26 59-3377948 Not Applicable Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 #106 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Orlando, Ζiρ Country 8. This corporation owes or has paid the current year Intangible Yes Yes 32819 LJ No USA Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 REDMOND, JOHN C 7081 GRAND NATIONAL DR 62 Street Address (P.O. Box Number is Not Acceptable) SUITE 108 83 ORLANDO FL 32819 84 City Zip Code s 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered incompanies of, Section 607.0505, Florida Statutes 11. Pursuant to the provisions (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE X Change Addition TITLE 1.1 TITLE REDMOND, JOHN C REDMOND, JOHN C. NAME 1.2 NAME 7081 GRAND NATIONAL DR #108 STREET ADDRESS 1.3 STREET ADDRESS 7081 Grand National DR. #106 ORLANDO FL CITY-ST-ZIP 1.4 CITY - ST - ZIP Orlando, FL. 32819 DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TATLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7/P DELETE Change 5.1 TITLE Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 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 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

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