CR2E034 (11/98)

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000043733

1. Corporation Name

ANTENNA CONNECTION, INC.

Principal Plac	
Principal Plac	e oi business

Mailing Address

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90105 006 ***150.00



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266 gatewood drive Largo FL 34640	266 GATEWOOD DRIVE LARGO FL 34640		DO NOT WRITE IN TH	IIS SPACE
			3. Date Incorporated or Qualifed 05/22/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	26		59-3387906	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	. Zip Cor	untry	This corporation owes the current year Personal Property Tax.	Intangible ☐ Yes ☐ No
9. Name and Address of Curre			10. Name and Address of New Registere	d Agent
Bennett, Kevin L		81 Name		
266 GATEWOOD DRIVE LARGO FL 34640		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
		83		
		84 City	F	- <u> </u>
11. Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State	02 and 607.1508, Florida Statutes, the a	above-named corp d by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered pointment as registered

agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change Addition ☐ DELETE 1.1 TITLE **PVST** TITLE 1.2 NAME BENNETT, KEVIN L NAME 266 GATEWOOD DRIVE 1.3 STREET ADDRESS STREET ADDRESS LARGO FL 34640 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE TITLE 2.1 TITLE BENNETT, KEVIN L 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 266 GATEWOOD DRIVE **LARGO FL 34640** 2.4 CITY-ST-ZIP CITY-ST-ZIF Addition ☐ Change ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 6.1 TITLE Change ☐ DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP CITY-ST-ZIP. 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 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, or on an attachment with an address, with all other like empowered.