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

Mailing Address

DAVIE FL 33314

US

4121 SW 47TH AVE

DOCUMENT # P97000014224

1. Corporation Name

Principal Place of Business

4121 SW 47TH AVE

DAVIE FL 33314

#1319

US

RUDNER/GARRETT COMMUNICATIONS, INC.

| S | | 03 | | | 02/10/1997 | | | |
|--|--|---------------------------------------|----------------------------|--------------------------|--|--|-----------------------|--|
| | | 2a. Mailing Address | | | 4. FEI Number | | ed For | |
| Principal Place of Business | | ├ ¬ | | | 65-0728089 | | pplicable | |
| <u> </u> | | 26 Suite Apt # etc | | | | \$8.75 Add | | |
| Suite, Apt. #, etc. | | | | | 5. Certificate of Status Desired | Fee Requ | | |
| 27 | | | | | 6. Election Campaign Financing | \$5.00 м | ay Be | |
| City & State | | | | | 6. Election Campaign Financing Trust Fund Contribution | Added to | | |
| | | | Country | | 8. This corporation owes the current year in | itangible | , | |
| Zip | Country | Zip | Country | | Personal Property Tax. | ☐Yes 💆 | ₹ N 6 | |
| a | 25 | 2930 | | | 10. Name and Address of New Registered | I Agent | | |
| *! | 9. Name and Address of Current | Registered Agent | - | | 10. Hallie and Address of the trans- | | | |
| | | | 1 1 | lame | · | | | |
| RUDNER, RICHARD 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | | | |
| 1190 | S.W. 59TH COURT | ÷, ÷ | | | | | | |
| COOPER CITY FL 33330 | | | | 83 | | | | |
| COO | I CH OH I I'E SOCCE | | | | | 85 Zip Co | ode | |
| | | | 1 1 | City | F | L Total | | |
| | _ | | | amod corpo | oration submits this statement for the purpose | of changing its r | egistered | |
| 11. Pursuant t | to the provisions of Sections 607.0502 | 2 and 607.1508, Florida Statutes, | the above-name | amed corpo | oration submits this statement for the purpose on's board of directors. I hereby accept the app | ointment as regi | stered | |
| office or re | egistered agent, or both, in the State of a familiar with, and accept the obligation | ions of, Section 607.0505, Florida | Statutes. | , | l. lea | | , | |
| agent. I ar | | Post of P | MIGH | | d when reinstating). | | _ . | |
| SIGNATURE | Signature, typed or printed name of registered agent | t and title if applicable. | gistered Agent sig | gnature required | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTOR | RS IN 12 | |
| | OFFICERS AN | D DIRECTORS | 13. | | | Change | Addition | |
| 12. | | ☐ DELETE | 1.1 TITLE | [| The state of the s | | | |
| TITLE | D BIGHARD | | 1.2 NAME | | | | | |
| NAME | RUDNER, RICHARD | | . 1.3 STREET AL | ODRESS | | | | |
| STREET ADDRESS | 11905 S.W. 59TH COURT | | | | • | | | |
| CITY-ST-ZIP | COOPER CITY FL 33330 | | 1.4 CITY-ST-Z | <u> </u> | | Change | ☐ Addition | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | • | | | |
| NAME | | | 2.2 NAME | | | | | |
| | | | 2.3 STREET A | DORESS | · | | | |
| STREET ADDRESS | | | 2. 4 CITY-ST- | ZiP | | Change | Addition | |
| CITY-ST-ZIP | | ☐ DELETE | 3.1 TITLE | | • | □ Auguste | | |
| TITLE | 1. 3 | | 3.2 NAME | | | | | |
| NAME | late of the | | 3.3 STREET A | DORESS | e de la composición | 5 5 6 B (* | 4 3 10 4 4 1 91 | |
| STREET ADDRESS | | | I. | | | <u>्राप्त</u> नेत्रीकृष्ट | 15 <u>. 15 - 15 -</u> | |
| CITY-ST-ZIP | ` | C) OF LETT | 3.4. CITY-ST- 4.1 TITLE | -21 | | ☐ Change | Addition | |
| TITLE | | ☐ DELETE | | | | | | |
| NAME | | • | 4, 2 NAME | 1 | | | | |
| STREET ADDRESS | | | 4.3 STREET A | ADDRESS | | | | |
| · . | | _ | 4.4 CITY-ST- | ZIP | | Change | ☐ Addition | |
| CITY-ST-ZIP | | ☐ DELETE | 5.1 TITLE | | | | | |
| TITLE | | | 5.2 NAME | | | | | |
| NAME | | | 5.3 STREET | ADDRESS | | | | |
| STREET ADDRESS | s _ | | 5.4 CITY-ST- | | | | | |
| CITY-ST-ZIP | . ` | | 6.1 TITLE | | | ☐ Change | Additio Additio | |
| TITLE | 512. 3.5 | ☐ DELETE | 1 | 1 | | | | |
| NAME | 1000 | | 6.2 NAME | | | | | |
| | | | 6.3 STREET | ADDRESS | | | | |
| STREET ADDRES | i | | 6.4 CITY-ST | | | andifu that the | information | |
| CITY-ST-ZIP | | with this filing does not qualify for | the exemption | on stated in | Section 119.07(3)(i), Florida Statutes, I furthe ure shall have the same legal effect as if made | r certify that the under oath: that | l am an | |
| 14. I hereby | r certify that the information supplied to d on this annual report or supplement | al annual report is true and accur | rate and that | my signatu | n Section 119.07(3)(i), Florida Statutes. I furne ure shall have the same legal effect as if made quired by Chapter 607, Florida Statutes; and th | at my name app | ears in | |
| indicate | or director of the corporation or the rec | ceiver or trustee empowered to ex | cecute this re | eport as req nnowered | fulled by Oliabios 2011 (101100 - 1111111) | | | |
| Block 1 | or director of the corporation or the rec 2 or Block 13 if changed, or on an atta | achment with an address, with all | OUISI IIKS SII | .,20,,3,00. | | | | |

SIGNATURE:

FILED

Feb 17, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

02-17-1999 90074 004 ***150.00