

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0081122

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000036162 (0)**

1. Corporation Name

MIDWEST DATACOMM, INC.

Principal Place of Business
**526 NORTHEAST 13TH STREET
FORT LAUDERDALE FL 33304**

Mailing Address
**526 NORTHEAST 13TH STREET
FORT LAUDERDALE FL 33304**

98 AUG 11 PM 2:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/23/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81

Name

Siegel & Utrera P.A. dba Amor Lawer

82

Street Address (P.O. Box Number Is Not Acceptable)

343 Almeria Avenue

83

84

City

Coral Gables

FL

85

Zip Code

33134

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am further authorized by the board of directors of the corporation to execute this statement on behalf of the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and understand the requirements of section 607.0503, Florida Statutes.

SIGNATURE

[Signature]

Vice President

Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	ARMSTRONG, MICHAEL T	
STREET ADDRESS	526 NORTHEAST 13TH STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL 33304	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	CHOATE, RONALD E	
STREET ADDRESS	526 NORTHEAST 13TH STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL 33304	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	700002614337-3
1.3 STREET ADDRESS	-08/12/98--01081--010
1.4 CITY-ST-ZIP	***150.00 ***150.00
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 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 Block 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

[Signature]

CR2E034 (5/98)



Midwest Datacomm

Southeast Division

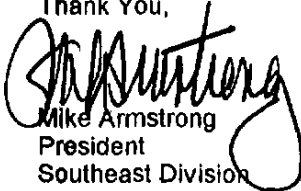
Wednesday, July 08, 1998

Florida Sept of State
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

On July 3, I received the 1998 Profit Corporation Annual Report marked 2nd notice. I did not receive the first notice nor did my Registered Agent, Amerilawyer of Coral Gables. The \$550.00 filing fee seems unwarranted under the circumstances. Any considerations extended would be greatly appreciated.

Thank You,


Mike Armstrong
President
Southeast Division