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

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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000039386 (2)

ACTIVE COMMUNICATIONS CORPORATION

Country

Principal Place of Business Mailing Address 1720 S ORANGE AVE. SUITE 300 1720 S ORANGE AVE. SUITE 300 ORLANDO FL 32806 ORLANDO FL 32806 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/01/1997 2. Principal Place of Business 2a. Mailing Address 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5 00 May Ba 6. Election Campaion Financino 23

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24 25 9. Name and Address of Current Registered Agent PATEL, HIRAN 1720 S ORANGE AVE, SUITE 300 ORLANDO FL 32808

Zip

STREET ADDRESS

CITY-ST-ZIP

	Trust Fund Contribution Added to Fees
Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
T	10. Name and Address of New Registered Agent
81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	Cily 85 Zip Code

FILED

May 07 1998 8:00am

Secretary of State

507,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered to submations of, Section 607,0505, Florida Statutes. 11. Pursuant to the office or registe 4.27.98 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE □ DLLETE Addition Change NAME 12 NAME #390 STREET ADORESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CHTY-ST-ZIP 32806 ... DELETE TITLE Addition 2.1 THILE Change NAME 2.2 NAME Ave. #300 060V86 STREET ADDRESS 2.3 STREET ADDRESS 32806 CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 THILE Change Addition NAME 3.2 NAME #300 STREET ADDRESS ange Ava 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE __ Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(TY - ST - ZIP DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME

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 of 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 or an attachment with an address.

6.3 STREET ADDRESS

Applied For

Not Applicable