PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000043258

1. Corporation Name

BALSTON COMMUNICATIONS, INC

Principal Place of Business	Mailing Address		
8278 BERMUDA SOUND WAY	8278 BERMUDA SOUND WAY		
BOYNTON BEACH FL 33436	BOYNTON BEACH FL 33436		

Mar 11, 1999 8:00 am Secretary of State 03-11-1999 90170 021 ***150.00

HALOTON COMMONICATIONS, INC	,			
Principal Place of Business	Mailing Address		1 188 FINGE 118 16111 18811 18611 18611 18611 1860 11114 1160 11114 1160 11114 1160	
8278 BERMUDA SOUND WAY	8278 BERMUDA SOUND WAY		· ·	
BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436				
			DO NOT WRITE IN THIS SPACE	-
			3. Date Incorporated or Qualifed	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For	
301 Yamato Road	26 301 Yamato Ro	ad _	65-0754419 Not Applicable	,
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
22 Suite 2121	27 Suite 2121		Fee Required	_
City & State	City & State	13	6. Election Campaign Financing \$5.00 May 8e	
Boca Raton, Florida	28 Boca Raton, F		Trust Fund Contribution Added to Fees	\dashv
Zip Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax. Yes You	
24 33431 25 USA	29 33431 30	USA	Personal Property Tax. LIYes XINO 10. Name and Address of New Registered Agent	┨
9. Name and Address of Curre	ill Kadistalan Adalit	81 Name	10. Hamo and Hadrood of How Key States 1, 8 states	٦
RALSTON, ROGER				4
8278 BERMUDA SOUND WAY BOYNTON BEACH FL 33436			Address (P.O. Box Number is Not Acceptable) 1 Yamato Road	
		83	1 Tallaco Road	┪
		Su	ite 2121	4
		84 City	Ca Raton FL 85 Zip Code 33431	
44 Burnings to the provisions of Sections 607.05	02 and 607 1508 Florida Statutes	the above-named of	compration submits this statement for the nurpose of changing its registered	\dashv
office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig	e of Florida. Such change was auth	iorized by the corpo	oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE		gistered Agent signature re	sourced when reinstating) DATE	-
Signature, typed or printed name of registered ag	IND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ヿ゙
12. OFFICERS A	☐ DELETE	1.1 TITLE	P Change Addition	'n
NAME RALSTON, MICHELE	_	1.2 NAME	ROGER H. RALSTON, SR.	
STREET ADDRESS 8278 BERMUDA SOUND WAY	(1.3 STREET ADDRESS	301 YAMATO ROAD, SUITE 2121	
DOVNTON BEACH EL 2042C		1.4 CITY-ST-ZIP	BOCA RATON, FL. 33431	
TITLE BUTNIUN BEAUTIFE 33436	DELETE	2.1 TITLE	Change Addition	'n
NAME		2.2 NAMÉ		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY-ST-ZIP	·	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition	ת
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		╛
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition	'n
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		╝
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition	n ∫
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS	·	ļ
CITY-ST-ZIP		5.4 CITY-ST-ZIP		\perp
TITLE	☐ DELETE	6.1 TITLE	Change Addition	วก
NAME		6.2 NAME	•	
PTPSET 4000E00		6.3 STREET ADDRESS		ſ

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 adcurate 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 effect the true of the corporation of the receiver or trustee empowered to effect the true of the corporation of the receiver or trustee empowered to effect the receiver or trustee empowered to effect the receiver of the corporation of the receiver or trustee empowered to effect the receiver of the receiver or trustee empowered to effect the receiver of the receiver of the receiver or trustee empowered to empower the receiver of the rece indicated on this annual report or supplement officer or director of the corporation of the re-Block 12 or Block 13 if changed or on an attack.

6.4 CITY-ST-ZIP

SIGNATURE: