## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED May 15, 2002 8:00 am Secretary of State

			1 05_15_2002 900	83 004 ***150.00	
DOCUMENT # P97000062869 1. Entity Name			,	83 004 130.00	
FARCOM COMMUNICATIO	NS, INC.	<b>√</b> .			
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2. Principal Place of Business 1221 Brickell Avenue 3. Mailing Address 1221 Brickell Avenue 1221 Bricke		ell	Wilder was		
Suite. Apt #. etc Suite, Apt #. etc. Suite 900 Suite 900			DO NOT WRITE IN THIS SPACE		
City & State Miami, FL	ni, FL City & State Miami, FL		4. FEI Number , 65-0768394	Applied For Not Applicable	
Zip Country 33131 US	Zip 33131	Country US	5. Certificate of Status Desired F	8.75 Additional ee Required	
		7. Name and Address of Current Registered Agent			
		Name Cor	orporate Creations		
DO NOT WRITE		Street Address	Street Address (P.O. Box Number is Not Acceptable)		
IN I III S	IN THIS SPACE		941 Fourth Street; #200		
and the part of the same of the same of	City Miami Beach FL 33939				
8. The above named entity submits this stateme	nt for the purpose of changing its o	registered office or registe	red agent; or both, in the State or Horida:		
SIGNATURE Skiraleire, typed or printerl name of registered :	sgent and title II applicable. (NOTE:	: Pegistered Agent signature require	d when reinstating) DATE	_	
This corporation is eligible to satisfy its Intang	January 15 M	ay 1 Fee is \$150.00 ै 1 Fee is \$550.00 🗎 🕈	10. Election Campaign Financing	\$5.00 May Be	
Tax filing requirement and elects to do so. (See criteria on back)	Amended Make Check Payab	UBR is \$61:25 le to Department of Sta	Trust Fund Contribution.	Added to Fees	
	AND DIRECTORS	100 St. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		KT 100 KK 1978 A. ANNEL PROTESSOR (1981 PROTESSOR )	
NAME Farkas, Micha	el D.	TITLE NAME	Carana de Carana da La Carana de Car	(12/0	
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13. Thereby certify that the information supplied	I with this filing does not qualify for	the exemption stated in S	Section 119.07(3)(i), Florida Statutes. I further cert e same legal effect as if made under oath; that I a	ify that the information	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under dail; that I am an office or directly 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 11 or on an attachment with an address, with all other like empowered.