

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
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DOCUMENT # P97000077011

1. Corporation Name

DREW COMM SERVICES, INC.

Principal Place of Business

280 NORTH SHORE DRIVE
MIAMI BEACH, FL 33141

Mailing Address

280 NORTH SHORE DRIVE
MIAMI BEACH, FL 33141

FILED

99 JUN 25 AM 7:57

DADE COUNTY, FLORIDA

5/13FFI 910037/034 \$150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEL Number	5. Certificate of Status Desired	6. Election Campaign Financing	7. This corporation owes the current year Intangible Personal Property Tax
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	09/05/1997	65-0793021	<input type="checkbox"/> \$8.75 Additional Fee Required	<input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
22 City & State	27 City & State					
23 Zip	28 Zip					
24 Country	29 Country					

8. Name and Address of Current Registered Agent

ROBERT M. GOLDMAN, E.A.
15838 N.W. 10th STREET
PEMBROKE PINES, FL 33028

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DIRECTOR <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VOGEL, ANDREW	1.2 NAME	
STREET ADDRESS	280 NORTH SHORE DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH, FL 33141	1.4 CITY-ST-ZIP	
TITLE	DIRECTOR <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDMAN, ROBERT M.	2.2 NAME	
STREET ADDRESS	15838 N.W. 10th STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES, FL 33028	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, or on any attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/99

Date

305-865-9155

Daytime Phone #

CR2E034 (1/98)