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).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000079164 (4)

MDR COMMUNICATIONS, INC.



98 JUL 10 AM 11:50

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Plac	e of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·		
1040 BAYVIEW		1040 BAYVIEW DRIVE #800			
FT. LAUDERDA		FT. LAUDERDALE FL 33304			
				DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified 09/12/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For	
21 901 N	. Reel Vista Blvd.	26 901 N. Reel	Vista Blvd	. 65-0821460 Not Applicab	le
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be	$\neg$
23 Fort l	Lau <b>de</b> rdale, FL	28 Fort Lauderd	ale, FL	Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24 33301	25 USA	29 33301 3	USA	Personal Property Tax due June 30. Yes X No	
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Registered Agent	
Casoria, 8. m iii			81 Name	k A. Buckstein	
1040 BAYMEW DRIVE #600		82 Street Addre		Address (P.O. Box Number is Not Acceptable)	-
FT. LAUDERDALE FL 33304		515 Ea		East Las Olas Boulevard	
			83		
			<u> </u>	te 1500	_
44 . 5	10 10 10 10 10 10 10 10 10 10 10 10 10 1	1007 4500 51 11 01 11		t Lauderdale FL 85 Zip Code 33301	
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 amy amiliar with, and accept the obligations of, section 607.0505, Florida Statutes.					
SIGNATURE	wondy-	<u> </u>	ark A. Buc	15119	$\gamma$
	Signature, typed of printed name of registered agent a	nd title if applicable. (NOTE	Registered Agent signatur	e required when reinstating) DATE	
					41
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	#
TITLE	D /	DIRECTORS X DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	#
TITLE NAME	CA <b>SO</b> RIA, S M III		1.1 TITLE 1.2 NAME		#
TITLE NAME STREET ADORESS	CASORIA, S M III 1040 BAYVIEW DRIVE #600		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		#
TITLE NAME STREET ADORESS CITY-ST-ZIP	CA <b>SO</b> RIA, S M III		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Change Addition	
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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 supplier 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 an attachment with an address.