

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

FILED
Mar 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000088520 (6)

1. Corporation Name

NATIONAL COMMUNICATIONS CONSULTANTS, INC.



Principal Place of Business

Mailing Address

130 UNIVERSITY PARK DRIVE
#210
WINTER PARK FL 32972

130 UNIVERSITY PARK DRIVE
#210
WINTER PARK FL 32972

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/13/1997

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business
21 120 University Park Dr.
Suite, Apt. #, etc.
22 # 230
City & State
23 WINTER PARK, FL
Zip
24 32792
Country
25 ORANGE

2a. Mailing Address
26 P.O. Box 4669
Suite, Apt. #, etc.
27
City & State
28 WINTER PARK, FL
Zip
29 32793
Country
30 ORANGE

9. Name and Address of Current Registered Agent

FEILER, MICHAEL B
3929 PONCE DE LEON BLVD
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

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

DATE

12. OFFICERS AND DIRECTORS

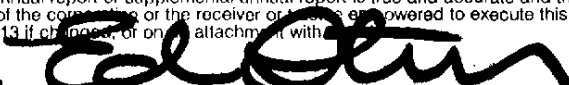
TITLE	D	<input type="checkbox"/> DELETE
NAME	ANDREW, JOSEPH	
STREET ADDRESS	130 UNIVERSITY PARK DRIVE, #210	
CITY-ST-ZIP	WINTER PARK FL 32972	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STEINBERG, EDWIN	
STREET ADDRESS	130 UNIVERSITY PARK DRIVE, #210	
CITY-ST-ZIP	WINTER PARK FL 32972	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ARTZ, PATRICK	
STREET ADDRESS	130 UNIVERSITY PARK DRIVE, #210	
CITY-ST-ZIP	WINTER PARK FL 32972	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	ANDREW, JOSEPH	
1.3 STREET ADDRESS	120 UNIVERSITY PARK DR. # 230	
1.4 CITY-ST-ZIP	WINTER PARK, FL 32792	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	STEINBERG, EDWIN	
2.3 STREET ADDRESS	120 UNIVERSITY PARK DR. # 230	
2.4 CITY-ST-ZIP	WINTER PARK, FL 32792	
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ARTZ, PATRICK	
3.3 STREET ADDRESS	120 UNIVERSITY PARK DR. # 230	
3.4 CITY-ST-ZIP	WINTER PARK, FL 32792	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 assignee of the corporation, or have been 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

SIGNATURE

 ED STEINBERG 2/27/98 407/657-0697

CR2E034 (10/97)