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

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90181 006 ***150.00

DOCUMENT

1. Corporation Name

SPACE (COAST COMMUNICATIONS,	, INC.					
Principal Place	of Business	Mailing Address			t indiant ita juul teht uutst ootti vaitt oot	., 81111 18811 18811	, 61611 adii 1881
100 EYSTER BLVD 100 EYSTER BLVD							
ROCKLEDGE FL 32955 ROCKLEDGE FL 32955					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					06/29/1998		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	X A	pplied For
21 3408 Heartwood Lane 26 3408 Heartwo			hoo	Lane		N	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				1102115	5. Certifcate of Status Desired	,	Additional
27					5. Certificate of Otatos Desired	Fee R	equired -
City & State	City & State			6. Election Campaign Financing	• -	May Be	
23 Melt	ourne, FL	120			Trust Fund Contribution		to Fees
Zip 24 3293	Country	Zip 32934 32	Count	,	8. This corporation owes the current year I	ntangible Yes	∑No
24 3293	34 [25] USA		0/ 0/		Personal Property Tax. 10. Name and Address of New Registered		12110
Name and Address of Current Registered Agent				1 Name	10. Name and Address of New Registered	i Ageilt	
KOSTRO, VICTOR S							
1825 RIVERVIEW DRIVE			Ī	32 Street A	ddress (P.O. Box Number is Not Acceptable)		J
MELBOURNE FL 32901			-	13			
IVILLI	5001112 16 52551			"			
			Ĩ	34 City	F	85 Zip	Code
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autr	iorizea i	by the corpor	orporation submits this statement for the purpose or ation's board of directors. I hereby accept the appropriate	of changing its	s registered egistered
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere				gent signature rec	juired when reinstating) DATE	ND DIDECT	OPS IN 12
12.	OFFICERS AND DIRECTORS XDELETE		13.	. — т	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS DICKORY X Change		
TITLE	D ADDAMANA DALDU	LADELETE	1	_	P/S/T/D	[24] a.variga	
NAME	ABRAVAYA, RALPH		1.2 NAM	1	LUCY ALEJO		ì
STREET ADDRESS	100 EYSTER BLVD		•	EET ADORESS	3408 Heartwood Lane Melbourne, FL 32934		ł
CITY-ST-ZIP	ROCKLEDGE FL 32955	DELETE	2.1 TITL	-ST-ZIP	Ass't S	Change	X] Addition
TIFLE			2.2 NAV	1	VICTOR S. KOSTRO		
NAME				EET ADDRESS	1825 Riverview Drive		ì
STREET ADDRESS				Y-ST-ZIP	Melbourne, FL: 32901		·
CITY-ST-ZIP		☐ DELETE	3.1 TITL		Meriourie, Fr. Jz.701	Change	Addition
NAME			3.2 NAM				
STREET ADDRESS				EET ADDRESS			}
CITY-ST-ZIP				(-ST-ZIP			
TITLE		☐ DELETE	4.1 TITL			Change	☐ Addition

5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TITLE Change DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

4.2 NAME

5.1 TITLE

5.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

4.4 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 an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

KOSTRO 1/21/99

Change

Addition