Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90071 048 \*\*\*150.00

## 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

## DOCUMENT # P98000062650

BUDGET	TEL COMMUNICATIONS, IN	IC.									
Principal Place	e of Business	Mailing Address								BIRIO 14000 3140	<b>  </b>
15833 111TH TER. N. 15833 111TH TER. N. JUPITER FL 33478 JUPITER FL 33478					DO NOT WRITE IN T					SPACE	
					-	3. Da	te Incorporated or		in his little	O. AOL	<del></del>
					ļ		/13/1998				
2. Principal Place of Business 2a. Mailing Address							Number			<b>M</b> A	pplied For
21		26	י י							P-30	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				<b>5</b> . Ce	rtifcate of Status I	tatus Desired			
City & State	e	City & State				6. Election Campaign Financing 55.00 May Be					May Be
23						Trust Fund Contribution Added to Fees					
Zip Country		Zip Cour		,			8. This corporation owes the current year in				
24	25	29	30			Personal Property Tax.					□No
	9. Name and Address of Curre	nt Registered Agent		T		10. Na	me and Address	of New R	legistered	Agent	
LIEDS	MCCON POUGLAC		81	Name				•		`	
HERMESCH, DOUGLAS				Street	Addres	ss (P.O. Box Number is Not Acceptable)					
15833 111TH TER. N.					_						
JUPI	TER FL 33478		83								
			84	84 City					FL	85 Zip	Code
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such change was aut ations of, Section 607.0505, Florid	horized by	the corpo	oration	s board	of directors. I nei	eby accep	DATE	intment as n	egistered (
12.	OFFICERS AND DIRECTORS		13.			_ ADE	ITIONS/CHANGI	S TO OF	FICERS A		
TITLE	D	☐ DELETE	1.1 TITLE		N/C	E SE	RESIDENT			☐ Change	Addition
NAME	HERMESCH, DOUGLAS		1.2 NAME		NN	144	CARROLL				
STREET ADDRESS	15833 111TH TER. N.		1.3 STREE	TADDRESS	158	(33	III TO N		_		
CITY-ST-ZIP	JUPITER FL 33478		1.4 CITY-S	T-ZIP	<u> </u>	ITER	, Florida	334	18		7
TITLE	D	DELETE	2.1 TITLE		<b>'</b>					☐ Change	`
NAME	HERMESCH, WAYNE	2.2 N									
STREET ADDRESS	0 100 0.11. 01., # 1		2.3 STREE	TADDRESS							
CITY-ST-ZIP	BOCA RATON FL 33428		2. 4 CITY-	ST-ZIP						Characa.	☐ Addition
TITLE		☐ DELETE	3.1 TITLE							☐ Change	☐ Addition
NAME			3.2 NAME								Į
STREET ADDRESS				TADDRESS							
CITY-ST-ZIP		☐ DELETE	3.4. CITY-1	ST-ZIP	<u> </u>					☐ Change	☐ Addition
TITLE	-	□ nere⊥e	4.1 TITLE 4 2 NAME								
NAME				T ADDRESS							
STREET ADDRESS			4.4 CITY-S								Ì
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	n - ZIF						Change	Addition
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREE	TADORESS							
CITY-ST-ZIP			5.4 CITY- S				, .				
TITLE		☐ DELETE	6.1 TITLE					•		Change	Addition
NAME			6.2 NAME	İ				,			
CTREET ADDRESS			63 STREE	T ADDRESS	l		• •		•		ļ

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 on 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 changes or on an attachment with all address, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

STREET ADDRESS

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR