## 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**  Apr 07, 1999 8:00 am Secretary of State 04-07-1999 90026 001 \*\*\*150.00

**DOCUMENT #** P98000094766

**CURTISS COMMUNICATIONS CORP.** 

Principal Place of Business Mailing Address						1	13 <b>38</b> 111 <b>38</b> 11 <b>4</b> 1	Alii Alan Irasa 4	I FIU USII TUUS
	I.S. HIGHWAY ONE	4300 SOUTH U.S. HIGHWAY ONE							
Suite 203 Jupiter FL 33	A77	SUITE 203 JUPITER FL 33477		DO NOT WRITE IN THIS SPACE					
SUPPLIES TO SUPPLI			r.*.			3. Date Incorporated or Qualifed			
ı						11/09/1998			
Principal Place of Business     2a. Mailing Address						4. FEI Number	i #	<del></del>	lied For
21 26 Suite And # ofe						65-087733	<b>7</b>	\$8.75 Ac	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired		Fee Req	
City & Stat	e e	City & State			6. Election Campaign Financing		\$5.00 N		
23 28						Trust Fund Contribution		Added to	- (
Zip	Country	Country Zip Cou				8. This corporation owes the curre	ent year Int		
24	25	_ <del></del>	10		. <u></u>	Personal Property Tax.			No
	9. Name and Address of Curren	t Registered Agent	81	7	Name	10. Name and Address of New R	egistered	Agent	<del></del>
AMERILAWYER					Name				
343 ALMERIA AVENUE			82	2	Street Addre	ss (P.O. Box Number is Not Accepta	ble)		
CORAL GABLES FL 33134			83	3	<del></del> -				
			L.	L		<del>_</del>		Teel 7:- 0	
			84	1	City		FL	85 Zip Co	ode
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State in familiar with, and accept the obligations.	of Florida. Such change was aut	horized by	/ In	named corpo ne corporation	ration submits this statement for the n's board of directors. I hereby accep	purpose of it the appoil	changing its r ntment as reg	egistered istered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: F				egistered Agent signature required			DATE		
12.	OFFICERS AND DIRECTORS					ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTOR	RS IN 12
TITLE	PSTD DELETE			1.1 TITLE				Onlings	
NAME CURTISS, ROBERT STREET ADDRESS 4300 SOUTH U.S. HIGHWAY ONE			1.2 NAME 1.3 STREET ADDRESS		DDDESS		,		Ì
STREET ADDRESS 4300 SOUTH U.S. HIGHWAY ONE CITY-ST-ZIP JUPITER FL 33477			1.4 CITY-ST-ZIP						
TITLE				2.1 TITLE				Change	Addition
NAME	2.			2.2 NAME					ĺ
STREET ADDRESS		2.3 STREET ADDRESS		ODRESS					
CITY-ST-ZIP				2. 4 CITY-ST-ZIP			:		
TITLE			3.1 TITLE	!				Change	Addition
NAME	"		3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP	····		_	3.4. CITY-ST-ZIP 4.1 TITLE				[7] Change	Addition
TITLE NAME				4.1 IIILE 4.2 NAME				_ ,	_
STREET ADDRESS			4.3 STREE		DORESS				
CITY-ST-ZIP			4.4 CITY-						
TITLE		☐ DELETE	5.1 TITLE	_				Change	☐ Addition
NAME			5.2 NAME		ĺ				
STREET ADDRESS			5.3 STREE						
CITY-ST-ZIP			5.4 CITY-1	5.4 CITY-ST-ZIP		_ <del></del>		Change	☐ Addition
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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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ROBESTIC WATER DECLURED **SIGNATURE** NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NAME

STREET ADDRESS

4/5/99

(36)7990216