

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S32841

(6)

1. Corporation Name

REACHCOM COMMUNICATIONS, INC.

FILED
1995 JUL 27 AM 10:18
TALLAHASSEE, FLORIDA

Principal Place of Business

2881 N. OAKLAND FOREST DRIVE
109
FT. LAUDERDALE FL 33309

Mailing Address

2881 N. OAKLAND FOREST DR.
#109
FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/18/1991
3a. Date of Last Report 04/06/1994

4. FEI Number 65-0262306
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$0.75 Additional Fee Required

6. This corporation has foreign income ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

SMITH, SHIRLEY S.
2881 N. OAKLAND FOREST DRIVE
#109
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 of Registered Agent (print name of registered agent and title if applicable)

(Print) Registered Agent signature required after registration

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
P	SMITH, SHIRLEY S.	2881 N. OAKLAND FOREST DR. #109	FT. LAUDERDALE FL 33309
ST	BROWN, SCOTT B	2881 N. OAKLAND FOREST DRIVE #109	FT. LAUDERDALE FL 33309

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(3)(k), 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.

SIGNATURE:

Shirley S. Smith
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR
SHIRLEY S. SMITH

7/20/95