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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V18100

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JHJ COMMUNICATIONS, INC.

FILED Apr 06 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address				r 1961) Driege staat stret stort easts dest, dest, dielt fielt fielt dielt dielt
ORLANDO F	Y Poin te Cr Fl. 326 28	P.O. BOX 536424 ORLANDO FL 32653				OO NOT WOITE IN THIS ORLOS
US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
2. Principal P	Place of Business	2a. Mailing Address				02/28/1992 4. FEI Number Applied For
21		26				4. FEI Number Applied For NOT APPLICABLE Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CO 75
22		27				5. Certificate of Status Desired Fee Regulred
City & Stat	le	City & State				Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes or has paid the current year Inlangible
24	25	29	30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent
	DHN H. JOLINSKI			81	Nan	Name
149 FAIRWAY POINTE CIRCLE				82 Street Address (P.O. Box Number is Not Acceptable)		
0	RLANDO FL 32828		ļ			
			ĺ	63		·
			ŀ	84	City	City 85 Zip Code
		4 ⁻				
l Office or r	registered agent, or both, in the Stat	e of Florida. Such chance wa	as authorized	vd b	the c	named corporation submits this statement for the purpose of changing its registered ne 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 as					
12.		PO DIRECTORS	13.	Age	nt signa	signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	DELETE	1.1 [1]			Change Addition
NAME	JOLINSKI, JOHN H.	_	1.2 NA			
STREET ADDRESS	149 FAIRWAY POINTE CIR				ADDRES	ngess .
CITY-ST-ZIP	ORLANDO FL		1.4 CII			
TITLE		DELETE	21 717			Change Addition
NAME	22		22 NA	22 NAME		
STREET ADDRESS			2.3 \$		ADDRES	DRESS
CITY-ST-ZIP			2, 4 €!	TY-S	I - ZIP	ZIP
TITLE			3.1 TIT	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	REET	ADDRES	DRESS
CITY-ST-ZIP			3.4. CI	1Y-S	T-ZIP	ZIP
TITLE		DELET E	4.1 10	LE		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 S1I	REET	ADDRES	DRESS
CITY-ST-ZIP			4.4 CIT	Y-SI	- ZIP	IP
TITLE		☐ DELETE	5.1 TIT	LE		Change Addition
NAME			52 NA	ME		
STREET ADDRESS			5.3 ST	REET A	AODRES	DRESS
CITY-ST-ZIP	· · · ·		5.4 CIT	Y-ST	·ZIP	
TITLE		☐ DELETE	6.1 TiT	LΕ		Change Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET A	addres	DRESS
CITY-ST-ZIP	partify that the information supplied		6.4 CIT	Y - S1	- ZIP	IP

14. I hereby certify that the information supplied with this filing doos not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ennual 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.

CICALATURE, WAY

nad John H. Johnski

4/1/98

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