FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # **V29950** (5)

1. Corporation Name

COMMUNICATIONS BY T.W., INC.

Principal Place of Business
4717 SW 39th Way
Fort Lauderdale, FL
33312

Mailing Address
4717 SW 39th Way
Fort Lauderdale, FL
33312

3. Date Incorporated or Qualified: 04/21/1992
3a. Date of Last Report: 02/16/1995
4. FEI Number: 65-0312329 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$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 4717 SW 39th Way
Suite, Apt. #, etc.
22
City & State
23 Fort Lauderdale, FL
Zip 24 33312 Country 25

2a. Mailing Address
26 4717 SW 39th Way
Suite, Apt. #, etc.
27 FORT LAUDERDALE - FL
City & State
28
29 33312 Current Country 30 Broward

9. Name and Address of Current Registered Agent

WALTER JR., THOMAS W.
~~5811 LONEWOOD CT.~~
~~JUPITER FL 33458~~
4717 SW 39th Way
Ft Lauderdale, FL 33312

Bill and Etta Walter
4717 SW 39th Way
Fort Lauderdale, FL
33312

10. Name and Address of New Registered Agent
81 Name: THOMAS W WALTER (Same person)
82 Street Address (P.O. Box Number is Not Acceptable): 4717 SW 39th Way
83 Ft Lauderdale
84 City: FL 85 Zip Code: 33312

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 THOMAS W. WALTER — Thomas W Walter — 4/16/96

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	WALTER, ETTA E.	
STREET ADDRESS	~~5811 LONEWOOD COURT~~	
CITY-ST-ZIP	~~JUPITER FL~~	
TITLE	DST	☐ DELETE
NAME	WALTER, THOMAS W	
STREET ADDRESS	~~5811 LONEWOOD~~	
CITY-ST-ZIP	~~JUPITER FL~~	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	☒ Change ☐ Addition
1.2 NAME	WALTER ETTA	
1.3 STREET ADDRESS	4717 SW 39 WAY	
1.4 CITY-ST-ZIP	Ft LAUDERdale FL 33312	
2.1 TITLE	DST	☒ Change ☐ Addition
2.2 NAME	WALTER Thomas W	
2.3 STREET ADDRESS	4717 SW 39 WAY	
2.4 CITY-ST-ZIP	Ft LAUDERDALE FL 33312	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 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: Etta E. Walter — 4/13/96 — 954 983 9705

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ETTA E. WALTER