

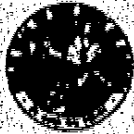
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

95 APR 19 AM 1:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **V41569** (7)

1. Corporation Name
INN COMMUNICATIONS, INC.

Principal Place of Business

704 114TH AVE NORTH
SUITE 02
LARGO FL 34643
US

Mailing Address

7411 114TH AVE NORTH
SUITE 30
LARGO FL 34643
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/09/1992

3a. Date of Last Report
02/10/1994

2. Principal Place of Business
21 **4330 W BROWARD BLVD** 25 **4330 W BROWARD BLVD**

4. FEI Number
65-0339764

Applied For
Not Applicable

22 **5** Suite, Apt. #, etc. 27 **5** Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75** Additional Fee Required

23 **PLANTATION FL** City & State 28 **PLANTATION FL** City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

24 **33317** Zip 25 **BROWARD** Country 29 **33317** Zip 30 **BROWARD** Country

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

9. Name and Address of Current Registered Agent

SKLAR, ROBERT Z
4801 S. UNIVERSITY DRIVE
FORT LAUDERDALE FL 33026

10. Name and Address of New Registered Agent

81 Name **KENNETH KRAMER**
82 Street Address (P.O. Box Number is Not Acceptable)
4330 WEST BROWARD BLVD
83
84 City **PLANTATION** FL 85 Zip Code **33317**

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 **KENNETH KRAMER**
Signature, typed or printed name of registered agent and title if applicable

[Signature]
(NOTE: Registered Agent signature required when reappointing)

4/14/95
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE **D**
NAME **KRAMER, KENNETH**
STREET ADDRESS **7411 114TH AVE N**
CITY - ST - ZIP **LARGO FL**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **D**
NAME **MARCUS, CLARK**
STREET ADDRESS **7411 114TH AVE N**
CITY - ST - ZIP **LARGO FL**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS **DELETE**
2.4 CITY - ST - ZIP

TITLE **D**
NAME **ROTHMAN, MARK**
STREET ADDRESS **7411 114TH AVE N**
CITY - ST - ZIP **LARGO FL**

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **D**
NAME **KRAMER, KENNETH**
STREET ADDRESS **4801 S UNIVERSITY DR**
CITY - ST - ZIP **FT. LAUDERDALE FL**

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 Section 110.07(3)(b), 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 as an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/95 Date **705-782-7076** Extension Number