

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILLED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 MAR 22 AM 9:52

DOCUMENT # V48952 (8)

1. Corporation Name

CELLULAR COMMUNICATOR CORPORATION



Principal Place of Business

1776 S TAMiami TR
VENICE FL 34293
US

Mailing Address

1776 S TAMiami TR
VENICE FL 34293
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt., etc.
22 City & State
23 Zip
24 Country

26 Suite, Apt., etc.
27 City & State
28 Zip
29 Country

g. Name and Address of Current Registered Agent

MELZER, DANIEL
1776 S TAMiami TRAIL
VENICE FL 34293

3. Date Incorporated or Qualified
07/06/1992

3a. Date of Last Report
06/13/1995

4. FEI Number
65-0341207

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

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

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
NAME: D MELZER, DANIEL
STREET ADDRESS: 1776 S. Tamiami Tr.
CITY, ST, ZIP: PT CHARLOTTE FL Venice, FL 34293
2. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
3. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
4. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
5. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
6. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

1. TITLE
NAME: Pres. Daniel MELZER, DANIEL
STREET ADDRESS: 1776 S. Tamiami Trail
CITY, ST, ZIP: Venice, FL 34293
2. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
3. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
4. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
5. TITLE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
6. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel L. Melzer
5/18/96 941-492-7111

CR2E034 (12/95)