

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED
95 APR 28 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G80932** (8)

1. Corporation Name
CORPORATE MANAGEMENT GROUP, INC.

Principal Place of Business Mailing Address
980 N FEDERAL HWY #210 BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/19/1983	3a. Date of Last Report 04/29/1994
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 58-1545984	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LEEDS, MARSHALL T. 980 N FEDERAL HIGHWAY SUITE 110 BOCA RATON FL 33432				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, typed or printed name of registered agent and title if appropriate (SEE Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
PD	LEEDS, MARSHALL T. 880 N FEDERAL HWY BOCA RATON FL	D Neal Sos 111 W. 50th Street New York, NY	<input checked="" type="checkbox"/>
VSD	MARKS, JOEL 1117 PERIMETER CENTER W. #500E ATLANTA GA	D Robert Cotton 111 W. 50th Street New York, NY	<input checked="" type="checkbox"/>
D	ESERNIO, ROBERT 111 W. 50TH ST. NEW YORK NY		<input type="checkbox"/>
TD	GLASER, GREGG S. 980 N FEDERAL HWY #210 BOCA RATON FL		<input type="checkbox"/>
D	FERGUSON, WILLIAM D. 980 N FEDERAL HWY #210 BOCA RATON FL		<input type="checkbox"/>
D	BRUNNER, JEFFREY 111 50TH ST. NEW YORK NY		<input type="checkbox"/>

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)(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gregg Blum Date: 4-19-95 Telephone: 407-336-2761
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR