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

CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Business	Mailing Address
9000 N. MILITARY TRAIL- FOURTH FLOOR- BOOK RATION FL 33421-	COURTH FLOOR BOCA PATON FL 39494 6912

FILED Feb 19 1997 8:00am Secretary of State

	1331	5,7,6,6,7,6,		
DOCU	MENT # P96000	037755 (1)		
	OMMUNICATIONS CORP.	, ,		
				: STORISTON ALG COREG TORIS TRAIN OFFICE COME COREG COME (CORE) (COREG TORIS)
Principal Disc	an of Dunings	Mailing Address		
good N. MILIT	ce of Business	Mailing Address		
-FOURTH FLOO	98-	COUNTY FLOOR		
BOCA-RATON	 FL-33131-	BOCA PATCH FL 30101-6810	}-	
				3. Date incorporated or Qualified 3a. Date of Last Report 05/01/1996
2. Principal P	Place of Business S. Australian A	2a. Mailing Address		4. FEI Number 3 1-1449597 Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22 510	1503	City 9 Ctata		Fee Required
City & Stat	+ Pain Beach	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Σή 20 λ	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,
24 0054	9. Name and Address of Current	29 30)	Florida Statutes Yes No
RLC	OCH: STUART E	negistered Agent	81 Name	10, Maine and Address of New Hegistered Agent
	N ANITARY TRAIL			benele schinaler
F0l	BATH-FLOOR-		82 Street A	ddress (P.O. Box Nymber is Not Acceptable)
B00	CA PATON FL 99481		83	
	•		84 City	act Oct Oct to B St Zin Code
			I I VYC	st raim brach FLII BRUDII
11. Pursuant office or g	to the provisions of Sections 607,0502 registered agent, or both, in the State o	and 607.1508, Florida Statutes, f Florida. Such change was aut	the above-named c horized by the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
1	familiar with farid accept the obligation	ons of, Section 607.0505, Floric	da Statutes.	hundler Common along
SIGNATURE	Signatur, typed or printed name of regionalized agent	and title if applicable (NOTE, R	legistered Agent signature ri	equired when reinstance) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		☐ DÉLETE	1.1 TITLE	President Change MAddition
NAME			1.2 NAME	Geoffici C. Plank 22910 Exford Pl Unit A
STREET ADDRESS CITY-ST-ZIP			1.3 STREET ADDRESS	12910 bx fora PI WILL A 130/0 Boton El 30/120
TITLE		DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	VICE-Prosident. Change Addition
NAME		_	22 NAME	Fred J. Johnston
STREET ADDRESS			23 STREET AD FRESS	5639 Baines Holdings
CITY-ST-ZIP			2.4 CITY-ST-ZIP	Milford, OH 45150
TITLE		☐ DELETE	3.1 TITLE	secretary Change Addition
NAME			3.2 NAME	Deneile A. Schindler Hulb
STREET ADDRESS			1	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP	West Palm Brach, TC 33901
NAME			4. 2 NAME	Designation of Plant
STREET ADDRESS			4.3 STREET ADDRESS	and oxford DI Unit A
CITY - ST - ZIP			4.4 CITY - ST - ZIP	25% 8000 FL 33483
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	// \.a.
STREET ADDRESS			5 3 STREET ADDRESS	<i>∧</i> ^> 21/1√
CITY-ST-ZIP		Belete	5.4 CiTY-ST-ZIP	
THILE		☐ DELETE	6.1 TITLE	-02/19/9701051024 Addition
NAME CODEET ADDRESS	}		6.2 NAME	***165.00
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRESS	**************************************
	by certify that the information supplied	with this filing does not qualify f	or the exemption sta	ated in Section 119 07(3)(i). 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 eath; 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.