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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # 458982



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

Katherine Harris Secretary of State

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90180 049 ***550.00

COMMU	INICATIONS MARKETING,	INC.							
Principal Plac	ce of Business	Mailing Address				- 1 (10)() 6 (04) 0 (01) 11(40 (10)36 (0)			
•		1827 S DIXIE HWY							
1827 S DIXIE HWY POMPANO BEACH FLORIDA 33060 POMPANO BEACH FLORIDA 3			33060			DO NOT INDIT	- IN THIO	ODACE	
US US						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						08/01/1974 4. FEI Number			Applied For
—	Place of Business	2a. Mailing Address						·	Not Applicable
21	4 -1-	Suite, Apt. #, etc.				59-1546841			5 Additional
						5. Certifcate of Status Desired			Required
City & Sta	te		City & State			6. Election Campaign Financing		\$5.0	May Be
23		28				Trust Fund Contribution			d to Fees
Zip	Country	Zip	Coun	try		8. This corporation owes the curre	ent year Inta	angible	
24	25	29 3	10			Personal Property Tax.		Yes	No
	9. Name and Address of Curre	· · · · · · · · · · · · · · · · · · ·				10. Name and Address of New R	egistered /	Agent	
				81 Na	ne				
FELSKI, JERRY M. JR.				32 Str	et Addre	ss (P.O. Box Number is Not Acceptal	ble)		
2710	D N. E. 59TH ST.			0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
FT.	LAUDERDALE FL 33308		1	В3					
			-	B4 Cit				85 Zi	p Code
				OIL	'		FL		,
12.	Signature, typed or printed name of registered a OFFICERS A	AND DIRECTORS	13.	gent signa	ure requireo	when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AN		
TITLE	PD	☐ DELETE	1.1 1111.	E				Chang	ge Addition
NAME	FELSKI, JERRY M., JR.		1.2 NAM	tE					
STREET ADDRESS	2710 NE 59 STREET		1.3 STR	EET ADDR	ESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY	/-ST-ZIP					
TITLE	TD	☐ DELETE	2.1 TITLE			•		☐ Chang	ge 🖺 Addition
NAME	FELSKI, JUNE		2.2 NAM	ME		•		,	
STREET ADDRESS			2.3 STR	EET ADDR	ESS				
CITY-ST-ZIP	FT. LAUDERDALE FL			Y-ST-ZIP				Chang	e Addition
TITLE		☐ DELETE	3.1 TITL					☐ Chang	je 🗌 Addition
NAMÉ			3.2 NAM						
STREET ADDRESS	5			EET ADDR	ESS				
CITY-ST-ZIP		☐ DELETE	3.4. CIT	Y-ST-ZIP				☐ Chang	e Addition
TITLE		וון מבנבינ							,
NAME			4.2 NA	ME EET ADDR	===				
STREET ADDRESS									
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITL	(-ST-ZIP E	+			Chang	ge Addition
NAME		<u> </u>	5.2 NAM						
STREET ADDRESS				EETADDR	ESS				
CITY-ST-ZIP				∕-ST-ZIP					
TITLE		☐ DELETE	6.1 TITE	E				Chang	e
NAME			6.2 NAM	1E					
STREET ADDRESS					1				
			6.3 STR	EET ADDR	ESS				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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, with all other like empowered.

SIGNATURE:

954-785-2000