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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400001458 (8)

COMMUNICATION SERVICES OF WASHINGTON D.C., INC.

1333 NEW HAMPSHIRE AVE NW 1333 NEW HAMPSHIRE A 1000 1000 WASHINGTON DC 20036 WASHINGTON DC 20036 US US						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 03/23/1994			
2. Principal Place of Business 2e. Mailing Address						4. FEI Number	A	oplied For	
21		26	28			<b>52-1803027</b> Not Applicat		lot Applicable	
Suite, Apt #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	е	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip <b>29</b>	30 Co	untry			Yes [	ntangible No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Ag			Agent		
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				82 83		dress (P.O. Box Number is Not Acceptable)	<b>85</b> Zip	Code	
agent. I a	m familiar with, and accept the e	obligations of, Section 607.0	505, Florida Sta	alutes ed Age	S. 	ation's board of directors. I hereby accept the application and the second seco			
12.	PCT	S AND DIRECTORS  DELI	13.	TITLE	<del></del>	ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition	
	WINSTON, JAMES L				1		C Change	Addition	
NAME	1222 NEW HAMPSHIRE	AVE NW	1	NAME	*********				
STREET ADDRESS	WASHINGTON DC	112 1111			ADDRESS				
CITY-ST-ZIP TITLE	SO	DELI		CITY-S	1-211		Change	Addition	
NAME	COOKE JR., FREDERICK D			2.1 TITLE 2.2 NAME			L.J. Sumigo		
STREET ADDRESS	1333 NEW HAMPSHIRE		1		ADDRESS				
CITY-51-ZIP	WASHINGTON DC			CITY - S					
TITLE	D	L. DELI		IITLE	SI-ZIP		Change	Addition	
NAME	STONE, STEVEN J			NAME	}		الماري الماري		
STREET ADDRESS	1333 NEW HAMPSHIRE	VE NW			ADDRESS				
	WASHINGTON DC								
CITY-ST-ZIP TITLE		DELE		CITY - S	H-ZIF		Change	Addition	
NAME			• • • • • • • • • • • • • • • • • • •	NAME	j				
STREET ADDRESS					ADDRESS				
					1				
CITY-ST-ZIP TITLE		DELL		TITY-S	1.71		Change	Addition	
NAME				NAME			- Ownige		
PVME									

14. Thereby certify that the information supplied with this filling 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 any Itachment with an address.

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY - ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

3/17/98.

E034 (10/97)

Change

Addition

**FILED** 

Mar 24 1998 8:00am

Secretary of State